Lowell Board of Health		City Ha 375 Me Lowell,	errimack Street
FOOD ESTABLISHMENT INSPECTION REPORT	Coultie		78-674-4144 78-446-7103
Name Bartlett School	Date 4/24/18	Type of Operation(s) Food Service	Type of Inspection Routine
Address 179 Wanna lancit	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978-937-8925		☐ Mobile ☐ Temporary	Date: ☐ Pre-operation
Owner	HACCP Y/N	☐ Caterer	☐ Suspect Illness
Person-in-Charge (PIC) Saure Comme	Time In:	☐ Bed & Breakfast	General Complaint HACCP
Inspector Jimmyle	Out:	Permit No.	Other
Water Temp 120° Serve-Safe Cert Number 134 84 641	ative page(s) a	nd a citation of specifi	c provision(s) violated
Violations Related to Foodborne Illness Interventions and		11/14/22 No.	n-compliance with:
(Red Items)	Risk Factors -	ServSafe Pest Cont	590.003 (A) rol 590.007
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	Anti-Chok Tobacco	
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination from	
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	wash Facilities	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	☐ 14. Appro	ved Food or Color Additive	es
FOOD FROM APPROVED SOURCE	☐ 15. Toxic	Chemicals	
4. Food and Water from Approved Source		ATURE CONTROLS (Potent	ially Hazardous Foods)
5. Receiving/Condition		ng Temperatures 	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea		
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	_	
PROTECTION FROM CONTAMINATION	_	nd Cold Holding as a Public Health Control	
8. Separation/Segregation/Protection9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTION	BLE-POPULATIONS (HSP)
10. Proper Adequate Handwashing		and Food Preparation for H	
☐ 11. Good Hygienic Practices	CONSUMER A	DVISORY g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board immediately or within 90 days as determined by the Board	To Foodbo and Risk F	Violated Provisions R rne Illnesses Intervent actors (Red Items 1-22	tions 2):
immediately or within 90 days as determined by the Board of Health.	today, the it	<i>ler for Correction:</i> Bas ems checked indicate vi eral Food Code, This re	ed on an inspection iolations of 105 CMR port, when signed below
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24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure	e to correct violations pension or revocation of
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food esta	ablishment permit and o	essation of food
27. Physical Facility (FC-6)(590,007)		nt operations. If aggriev to a hearing. Your requ	
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitte	ed to the Board of Healt	h at the above address
29. Special Requirements (590.009) 30. Other		ys of receipt of this orde -INSPECTION:	er.
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Inspector's Signature: Print:	Jimn	. /2	
PICs Signature: Print:	1 0110		Page of Pages
- Simila (mood	nauriy	e Conroy	

City Hall 375 Merrimack Street Lowell, MA **Lowell Board of Health** Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine **Address** Retail Re-inspection Risk 51 Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness ☐ General Complaint Bed & Breakfast Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1348964 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors ervSafe 590.003 (A) [(Red Items) **Pest Control** 590.007 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Anti-Choking Tobacco 590.009 (F) \square corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print:

Print:

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Pages

PICs Signature:

			rimack Street
Lowell Board of Health	1 11.	Lowell, N	лА 3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Conflex	Fax: 978	3-446-7103
Name Bustleft School	Date 3/13/19	Type of Operation(s) Food Service	Type of Inspection Routine
Address 179 Voyna (uncit St	Risk	Retail Residential Kitchen	Re-inspection
Telephone	Level	☐ Mobile	Previous Inspection Date:
Owner	HACCP Y/N	- ☐ Temporary ☐ Caterer	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint HACCP
Inspector li m m le	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the nar	rative page(s) a	and a citation of specific	provision(s) violated
Water Temp 130° Serve-Safe Cert Number 13 45769	\mathcal{L} Expiration Num	nber 4/9/21	
Violations Related to Foodborne Illness Interventions and (Red Items)	l Risk Factors -	Non- ServSafe Pest Contro.	compliance with: 590.003 (A) ☐ I 590.007 ☐
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat		9 590.009 (E) □ 590.009 (F) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	• •
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand\	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	_	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	,
Teceromy/condition 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	ng	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBL	
☐ 10. Proper Adequate Handwashing	CONSUMER A	and Food Preparation for HS	۲
11. Good Hygienic Practices		g of Consumer Advisories	
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26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm8-14.doc	establishme have a right and submitt within 10 da	ent operations. If aggriever to a hearing. Your request ted to the Board of Health ays of receipt of this order.	d by this order, you at must be in writing at the above address
Inspector's Signature: Print:	, Ku	um de.	
PICs Signature: Print:	Lauri	e Corroy	PageofPages

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Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT Name Boy Hett School Cafe Address 199 Wannalque it St		ŀ	Eiteler	O:4 I I=II		
		1111	a lassed	City Hall	imack Str	oot
Lowell Doord of Hoolth	porent	Ne (Clo-L	Lowell, M		561
Lowell Board of Health	11.	poded	Và	Tel.: 978	-674-4144	1
FOOD ESTABLISHMENT INSPECTION REPORT	r fetion 1	• • • • •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Fax: 978	-446-7103	3
Name Boutlett School Cate	Date 9	0/19	Type of Opera	tion(s)	Type of In	nspection
Address 12 ct 1 leave 1 5/	Risk	411	Retail	,6	Re-ins	pection
Telephone () G () CMMG/G/MC + 7/	Leve	I .	│	Kitchen	Previous I Date:	Inspection
Owner	HAC	CP Y/N	Temporary		☐ Pre-op	eration
Person-in-Charge (PIØ)	A Time		│	kfast		ct Illness al Complaint
Inspector	In:		Dormit No.		HACCI	
1. DAMA CE	Out:		Permit No.		Other_	
Each violation checked requires an explanation on				f specific	provision	(s) violated
Water Temp Serve-Safe Cert Number /31/			ber <u>4/4/2/</u>	Non-o	ompliance	with:
Violations Related to Foodborne Illness Intervention	ons and Risk I	actors -	11/14/02	ServSafe	5	590.003 (A) 🗆
(Red Items) Violations marked may pose an imminent health hazar	d and require i	m m a diat		Pest Control Anti-Choking		590.007
corrective action as determined by the Board of Health	a ana require i i.	nmediate		Tobacco	5	590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT		10 Dec. 10		Allergen Aw		590.000 (G) 🗆
☐ 1. PIC Assigned/Knowledgeable/Duties			ntion of Contamir	ation from F	ands	
EMPLOYEE HEALTH	LJ	13. Handy	vash Facilities			
Reporting of Diseases by Food Employee and PIC			FROM CHEMICAL			
☐ 3. Personnel with Infections Restricted/Excluded			ved Food or Colo	r Additives		
FOOD FROM APPROVED SOURCE		15. Toxic	Chemicals			
4. Food and Water from Approved Source	TIM	E/TEMPER	ATURE CONTROL	S (Potential	iy Hazardou	s Foods)
5. Receiving/Condition		16. Cookir	ng Temperatures			
☐ 6. Tags/Records/Accuracy of Ingredient Statements		17. Rehea	iting			
☐ 7. Conformance with Approved Procedures/HACCP Plan	ns 🗀	18. Coolin	g			
PROTECTION FROM CONTAMINATION		19. Hot an	d Cold Holding			
8. Separation/Segregation/Protection		20. Time <i>a</i>	as a Public Health	Control		
☐ 9. Food Contact Surfaces Cleaning and Sanitizing			TS FOR HIGHLY-S and Food Prepara			TIONS (HSP)
☐ 10. Proper Adequate Handwashing		ISUMER A	•	ation for hor		
11. Good Hygienic Practices			g of Consumer A	dvisories		
Violations Related to Good Retail Practices_(Blue						
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mmediately or within 90 days as determined by the Boar			ler for Correct	-	on an ins	pection
of Health.	too	lay, the it	ems checked ir	idicate viol	ations of 1	105 CMR
C N			eral Food Code			
23. Management and Personnel (FC-2)(590,003	′		of Health memb Board of Health			
24. Food and Food Protection (FC-3)(590.004 25. Equipment and Utensils (FC-4)(590.005	') cita		report may resu			
	" the		ablishment peri			
26. Water, Plumbing and Waste (FC-5)(590.006 27. Physical Facility (FC-6)(590.007	. esi		nt operations. I			
28. Poisonous or Toxic Materials (FC-7)(590.008	· IIG		to a hearing. Y			
29. Special Requirements (590.009			ed to the Board ys of receipt of		at the abo	ve address
30. Other			-INSPECTION:	una order.		
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PICs Signature:	Print: / N)	1014	ymy le	~11	Page	of Pages
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THE COMMONWEALTH OF MASSACHUSETTS

35 John Street 2nd floor Lowell, MA 01852

OF Lowell

City

Board of Health

Date Verified Employee Restriction / Exclusion Emergency Suspension Yes **Emergency Closure** ð Other °N □ O O Page: Corrective Action Required: Re-inspection Scheduled Voluntary Compliance DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal 6/16/16 tclar Embargo σ Ø PLEASE PRINT CLEARLY Date: Pedporing E Lan chore School (emus) Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name:_ Code Reference 9

City Hall le operal 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine Address Retail Re-inspection Riśk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1369641 Expiration Number 4/9 Water Temp Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 (Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) **FOOD PROTECTION MANAGEMENT** 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH PROTECTION FROM CHEMICALS** 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source

□ 9. Food Contact Surfaces Cleaning and Sanitizing
 □ 10. Proper Adequate Handwashing
 □ 11. Good Hygienic Practices
 Violations Related to Good Retail Practices (Blue Items)
 Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

☐ 6. Tags/Records/Accuracy of Ingredient Statements

☐ 7. Conformance with Approved Procedures/HACCP Plans

☐ 5. Receiving/Condition

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PROTECTION FROM CONTAMINATION

8. Separation/Segregation/Protection

C	N		
		23. Management and Personnel	(FC-2)(590.003)
		24. Food and Food Protection	(FC-3)(590.004)
		25. Equipment and Utensils	(FC-4)(590.005)
		26. Water, Plumbing and Waste	(FC-5)(590.006)
		27. Physical Facility	(FC-6)(590.007)
		28. Poisonous or Toxic Materials	(FC-7)(590.008)
		29. Special Requirements	(590.009)
		30. Other	

☐ 16. Cooking Temperatures

☐ 17. Reheating

☐ 18. Cooling

☐ 19. Hot and Cold Holding

☐ 20. Time as a Public Health Control

REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP)

21. Food and Food Preparation for HSP

CONSUMER ADVISORY

22. Posting of Consumer Advisories

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.

DATE OF RE-INSPECTION:

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Inspector's Signature:	Print: June le	-
PICs Signatures PILATE CINDY	Print: Laurie Conroy	PageofPages

		City Hall	
		375 Merr Lowell, M	imack Street
Lowell Board of Health	1	Tel: 978	-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Complias	Fax: 978	-446-7103
Name Butler School	Date 7/18	Type of Operation(s) ✓ Food Service	Type of Inspection Routine
Address 1140 Gotham St.	Risk Level	│	Re-inspection Previous Inspection
Telephone 922 932 18/1	Level	Mobile	Date:
Owner	HACCP Y/N	☐ Temporary	☐ Pre-operation
Person-in-Charge (PIC)	Time	☐ Caterer☐ Bed & Breakfast	☐ Suspect Illness☐ General Complaint
GIZANNE UEEV	In:		HACCP
Inspector LISA SAM	Out:	Permit No.	Other
Each violation checked requires an explanation on the		.,	provision(s) violated.
Water Temp Serve-Safe Cert Number /0305	5	ber 8/49/78	compliance with:
Violations Related to Foodborne Iliness Interventions	and Risk Factors -	ServSafe	590.003 (A) 🗆
(Red Items)		Pest Control Anti-Chokin	
Violations marked may pose an imminent health hazard are corrective action as determined by the Board of Health.	ia require immediate	Tobacco	590.009 (F)
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FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from	Hands
-	<u> </u>	wash Facilities	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	14. Appro	ved Food or Color Additives	
	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition	🗌 16. Cooki	ng Temperatures	
_	🗌 17. Rehea	ating	•
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	ıg	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	TS FOR HIGHLY-SUSCEPTIBL	E-POPULATIONS (HSP)
	☐ 21. Food a	and Food Preparation for HS	P
10. Proper Adequate Handwashing	CONSUMER A		(5
11. Good Hygienic Practices	☐ 22. Postin	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board	To Foodbo	Violated Provisions Reprine Illnesses Intervention (Red Items 1-22)	ons
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23. Management and Personnel (FC-2)(590.003)		of Health member or its a Board of Health. Failure t	
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ce	
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008)		ed to the Board of Health	
29. Special Requirements (590.009)	within 10 da	ys of receipt of this order.	
30. Other		E-INSPECTION:	
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Inspector's Signature:	int: LISA SA	am	
PICs Signature:	int: Suz marine	Over	Page of Pages

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144 Fax: 978-446-7103 Type of Inspection Food Service **D**Routine Retail Re-inspection Residential Kitchen Previous Inspection Mobile Date: Temporary ☐ Pre-operation Caterer ☐ Suspect Illness Bed & Breakfast General Complaint HACCP ☐ Other Non-compliance with: 590.003 (A) 🗆 ServSafe Pest Control 590.007 Anti-Choking 590.009 (E) Tobacco 590.009 (F) 🗆 590.000 (G) □ Allergen Awareness

Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT Name Type of Operation(s) Address Level Telephone Owner HACCP Y/N Person-in-Charge (PIC) Time ln: Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. __ Serve-Safe Cert Number 168476// Expiration Number 8/23 Violations Related to Foodborne Illness Interventions and Risk Factors -(Red Items) Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health. FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP. ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION:

Inspector's Signature: Print: PICs Signature: Print:

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375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name of Operation(s) Type of Inspection Food Service Routine Re-inspection **Address** Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP ln: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1684-161 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: **Print:**

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PICs Signature:

City Hall

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service 2 Routine Re-inspection **Address** Risk Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time Osec UZANNE HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1865-958 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors 590.003 (A) 🗆 ServSafe (Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

Inspector's Signature:

Print: LSS Sam

Print: Signature:

Print: Signature:

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375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Date of Operation(s) Type of Inspection Name Routine Food Service Re-inspection Retail Address Previous Inspection Residential Kitchen Level Telephone Mobile Date: Pre-operation Temporary HACCP Y/N Owner Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) yiolated. Water Temp ______ Serve-Safe Cert Number Expiration Number _ Violations Related to Foodborne Illness Interventions and Risk Factors COKI nyNon-compliance with: 590.003 (A) 🗆 Serv3afe (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Inspector's Signature

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City Hall

375 Merrimack Street

Lowell, MA

Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 ype of Operation(s) Type of Inspection Food Service Routine Address Retail Re-inspection Residential Kitchen Previous Inspection Telephone Mobile Date: Pre-operation Temporary Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other ISA SAN Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) \square (Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signatur Print: PICs Signature: Print:

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Type of Inspection Type of Operation(s) Food Service Routine Address Re-inspection Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness General Complaint Bed & Breakfast Person-in-Charge (PIC Time HACCP In: Inspector Permit No. Other SA Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 13158532 Expiration Number Water Temp . Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 **Anti-Choking** 590.009 (E) 🗀 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR C 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility

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DATE OF RE-INSPECTION:

Inspector's Signature: Print: 15A Sam	
PICS Signature: Karen Paciulan Print: Karen Paciulan	Page of Pages

(FC-6)(590.007)

(590.009)

28. Poisonous or Toxic Materials (FC-7)(590.008)

29. Special Requirements

30. Other

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City Hall 375 Merrimack Street

Lowell Board of Health	\circ	Lowell, N		
FOOD ESTABLISHMENT INSPECTION REPORT	()pm	, ,	3-674-4144 3-446-7103	
Name O	Date	Type of Operation(s)	Type of Inspection	
Cardinal School	9/23/19	Tood Service	Routine	
Address 21 Carter St.	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection	
Telephone 979-446- 7007)	Lovei	Mobile Mobile	Date:	
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness	
Person-in-Charge (PIC) Caith a Durcha	Time	Bed & Breakfast	☐ General Complaint	
Inspector / /sa San	In:	Permit No.	☐ HACCP ☐ Other	
Each violation checked requires an explanation on the narra	Out:			
Water Temp Serve-Safe Cert Number	Expiration Num	ber 1/30/21	provision(s) violateu.	
Violations Related to Foodborne Illness Interventions and		/ Non-	compliance with:	
(Red Items)	71.5K 7 401073	Pest Control	590.003 (A) □ 590.007 □	
Violations marked may pose an imminent health hazard and re-	quire immediate	Anti-Chokin Tobacco	· · · · ·	
corrective action as determined by the Board of Health.		Allergen Aw	590.009 (F) □ vareness 590.000 (G) □	
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from	Hands	
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities		
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS		
2. Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives		
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic			
FOOD FROM APPROVED SOURCE	_			
4. Food and Water from Approved Source		ATURE CONTROLS (Potential	lly Hazardous Foods)	
☐ 5. Receiving/Condition		ng Temperatures 		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	-		
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolin	-		
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding		
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control		
9. Food Contact Surfaces Cleaning and Sanitizing		REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 21. Food and Food Preparation for HSP		
☐ 10. Proper Adequate Handwashing	CONSUMER A		r	
☐ 11. Good Hygienic Practices		g of Consumer Advisories		
Violations Related to Good Retail Practices_ (Blue				
tems) Critical (C) violations marked must be corrected		Violated Provisions Re		
mmediately or within 10 days as determined by the Board		erne Illnesses Interventio actors (Red Items 1-22):		
of Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board		der for Correction: Base		
of Health.		ems checked indicate vio		
CN		leral Food Code. This rep		
23. Management and Personnel (FC-2)(590.003)		of Health member or its a Board of Health. Failure t		
24. Food and Food Protection (FC-3)(590.004)		report may result in suspe		
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food est	ablishment permit and ce	ssation of food	
07 51 1 5 10	establishme	ent operations. If aggrieve	d by this order, you	
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your reques		
29. Special Requirements (590.009)		ed to the Board of Health ys of receipt of this order.		
30. Other		E-INSPECTION:		
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City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health undiant Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine Re-inspection **Address** Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation HACCP Y/N Owner Caterer ☐ Suspect Illness Bed & Breakfast ☐ General Complaint Time aron ☐ HACCP In: Permit No. Other Inspector Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. __ Serve-Safe Cert Number 11123285 Expiration Number 6/6/ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 **Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements within 10 days of receipt of this order. (590.009)

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DATE OF RE-INSPECTION:

Page ___ of ___ Pages

30. Other

S: 590InspectForm6-14.doc

PICs Signature

Inspector's Signature:

City Hall 375 Merrimack Street

Lowell, MA

Lowell	Board	of	Health	(
				/

Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Type of Operation(s) Type of Inspection Food Service Routine Address Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/M Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC Time ☐ HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 11123285 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [(Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS □ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing

Violations Related to Good Retail Practices (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

☐ 10. Proper Adequate Handwashing

☐ 11. Good Hygienic Practices

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L	C	N		
			23. Management and Personnel	(FC-2)(590.003)
			24. Food and Food Protection	(FC-3)(590.004)
			25. Equipment and Utensils	(FC-4)(590.005)
			26. Water, Plumbing and Waste	(FC-5)(590.006)
			27. Physical Facility	(FC-6)(590.007)
			28. Poisonous or Toxic Materials	(FC-7)(590.008)
			29. Special Requirements	(590.009)
			30. Other	

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

and submitted to the Board of Health at the above address.

☐ 21. Food and Food Preparation for HSP

☐ 22. Posting of Consumer Advisories

CONSUMER ADVISORY

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing

DATE OF RE-INSPECTION:

within 10 days of receipt of this order.

Inspector's Signature:	Print: 115A SAM	
PICs Signature: Jacon Ozona	Print: Sharon Ozona	Page of Pages

City Hall 375 Merrimack Street Lowell, MA

Lowell Board of Health		Lowell, N	
FOOD ESTABLISHMENT INSPECTION REPORT	Come		8-674 - 4144 8-446-7103
Name Charter School Address 200 Tale	Date 3/21/19 Risk	Type of Operation(s) Food Service Retail	Type of Inspection Routine Re-inspection
Tolonbono	Level	Residential Kitchen	Previous Inspection
149-22-2400		│	Date: Pre-operation
Owner	HACCP Y/N	☐ Caterer	Suspect Illness
Person-in-Charge (PIC) Sharon Ozana	Time In:	Bed & Breakfast	General Complaint HACCP
Inspector LISA SAM	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation of specific	provision(s) violated
Water Temp 250 Serve-Safe Cert Number 1123285			compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)		ServSafe Pest Contro	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	e Anti-Chokir Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from l wash Facilities	Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS ved Food or Color Additives	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potentiang Temperatures	lly Hazardous Foods)
5. Receiving/Condition	🗌 17. Rehea	iting	
6. Tags/Records/Accuracy of Ingredient Statements	18. Cooling	g	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot an	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBI and Food Preparation for HSI	
☐ 10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Postino	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo and Risk Fa	Violated Provisions Rel orne Illnesses Intervention actors (Red Items 1-22):	ons
immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health. C N 23. Management and Personnel (FC-2)(590.003)	590.000/fed by a Board	tems checked indicate vio deral Food Code. This rep of Health member or its a	ort, when signed below gent constitutes an
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		Board of Health. Failure to report may result in suspe	
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food est	tablishment permit and ce	essation of food
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve t to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitt	ed to the Board of Health	at the above address
29. Special Requirements (590.009)	within 10 da	ays of receipt of this order. E-INSPECTION:	•
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Inspector's Signature: Print:	7	<u> </u>	<u></u>
PICs Signature: Print:	415A S	M	Page / of Pages

Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT	Con	ndied	Lowell, N Tel.: 978 Fax: 978	rimack S MA 8-674-41	44
Name Charter School Address 206 Jackson St. Telephone 978-323-0800 Owner Person-in-Charge (PIC) Sharon Ozana Inspector 1/84 Sam	Risk Level HACCP Y/N Time In: Out:	Retail Residentia Residentia Mobile Temporary Caterer Bed & Brea	ce Kitchen akfast	Re-ir Re-ir Re-ir Previous Pre-conditions General HAC Othe	nspection s Inspection operation oect Illness eral Complaint CP
Water Temp Serve-Safe Cert Number 82			19	provisio	
Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.		e	ServSafe Pest Contro Anti-Chokir Tobacco Allergen Av	ol ng	590.003 (A)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contami	nation from	Hands	, ,
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICA ved Food or Col			
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source 5. Receiving/Condition	TIME/TEMPER	RATURE CONTRO	•	lly Hazard	ous Foods)
 ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 7. Conformance with Approved Procedures/HACCP Plans PROTECTION FROM CONTAMINATION 	☐ 18. Coolin ☐ 19. Hot ar	ng nd Cold Holding			
8. Separation/Segregation/Protection 9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	as a Public Healt I TS FOR HIGHLY- and Food Prepar	SUSCEPTIB		ATIONS (HSP)
☐ 10. Proper Adequate Handwashing ☐ 11. Good Hygienic Practices Violations Related to Good Retail Practices (Blue	CONSUMER A 22. Postin	ADVISORY g of Consumer A	dvisories		

Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

ſ	C	ΙN		
Ì			23. Management and Personnel	(FC-2)(590.003)
			24. Food and Food Protection	(FC-3)(590.004)
			25. Equipment and Utensils	(FC-4)(590.005)
ſ			26. Water, Plumbing and Waste	(FC-5)(590.006)
ľ			27. Physical Facility	(FC-6)(590.007)
I			28. Poisonous or Toxic Materials	(FC-7)(590.008)
			29. Special Requirements	(590.009)
Γ			30 Other	

S: 590InspectForm6-14.doc

Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

n inspection s of 105 CMR

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.

DATE OF RE-INSPECTION:

Inspector's Signature:	Print: LISA SAM	
PICs Signature: / ham Ozan a	Print: Sharon Ozana	Page of Pages
7,000		

City Hall 375 Merrimack Street

_owell	Board	of Health	C
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Compliant

Lowell, MA Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT	Comp	ciani	Fax: 978	3-446-710	13
Address 77 Chestnut Square after Schol Telephone	Date 3/15/18/ Risk Level	Type of Operation(s) Food Service Retail Residential Kitchen Mobile		Routi Re-in Previous Date:	spection Inspection
Owner	HACCP Y/N	Temporary Caterer	/		peration ect Illness
Person-in-Charge (PIC) Nilda Tomes	Time In:	Bed & Bre	akfast		ral Complaint
Inspector LISA SAM	Out:	Permit No.		☐ Other	
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation	of specific	provisio	n(s) violated
Water Temp Serve-Safe Cert Number	Expiration Num	ber		!i	a saifélaí
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -		ServSafe Pest Contro	complianc I	590.003 (A) 590.007
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	е	Anti-Chokir Tobacco Allergen Av	•	590.009 (E) 590.009 (F) 590.000 (G)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ention of Contan wash Facilities	nination from	Hands	
EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC 3. Personnel with Infections Restricted/Excluded FOOD FROM APPROVED SOURCE		FROM CHEMICA oved Food or Co Chemicals		.	
4. Food and Water from Approved Source		RATURE CONTRO ing Temperature	•	lly Hazarde	ous Foods)
5. Receiving/Condition	☐ 17. Rehe	ating			
6. Tags/Records/Accuracy of Ingredient Statements	🗌 18. Coolir	ng			
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot a	nd Cold Holding	j		
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Hea	alth Control		
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY			ATIONS (HSP)
☐ 10. Proper Adequate Handwashing	21. Food	and Food Prepa	aration for HS	SP	
11. Good Hygienic Practices	CONSUMER A	ADVISORY ng of Consumer	Advisorios		
	22.1 03.11	ig or consumer	Advisories		
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodb	f Violated Pro orne Illnesse: Factors (Red	s Interventi	ions	
immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc	today, the i 590.000/fed by a Board order of the cited in this the food es establishme have a righ and submit within 10 da	tems checked deral Food Co of Health mere Board of Heast report may restablishment poent operations at to a hearing. It do to the Board ays of receipt E-INSPECTION	indicate vio de. This rep mber or its a alth. Failure esult in susp ermit and ce . If aggrieve Your reque rd of Health of this order	plations of port, when agent contour to correct ension of essation of est must be at the all	f 105 CMR n signed below stitutes an t violations r revocation o of food order, you oe in writing
PICs Signature: Print:	LISA	SAM	13	Page_	of Pages

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service 4 Routine **Address** Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation HACCP Y/N Owner Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC Time HACCP ln: Other Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp ______ Serve-Safe Cert Number ___ Expiration Number _ no cookina Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate Tohacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signature: Print:

City Hall 375 Merrimack Street

3/3 Mellinack Street
Lowell, MA
Tel.: 978-674-4144

Lowell Roard of Health

Lowell Board of Health			el.: 978-674-4	
FOOD ESTABLISHMENT INSPECTION REPORT	Comy		ax: 978-446-7	
Address 77 Chestnut St. Telephone 976-4500 0 70	Date 3 5 19 Risk Level	Type of Operation Type of Operation Type of Operation Retail Residential Kite	Rou Re- chen Previo	of Inspection utine -inspection us Inspection
110-434-0-510		Mobile Temporary	Date:	e-operation
Owner Elsie	HACCP Y/N	☐ Caterer	☐ Sus	spect Illness
Person-in-Charge (PIC) ASIE rarozzo M	Time	Bed & Breakfa	0.00000	neral Complaint CCP
Inspector LISA SAM	In: Out:	Permit No.	Oth	
Each violation checked requires an explanation on the narra	ative page(s) a			
Water Temp Serve-Safe Cert Number	Expiration Num	iber/	10 COOKE	Section 1
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	Pes	Non-compliant rvSafe st Control	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	equire immediate	Tol	iti-Choking bассо leгgеп Awareness	590.009 (E) 590.009 (F) 590.000 (G)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination vash Facilities	on from Hands	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS		
3. Personnel with Infections Restricted/Excluded	☐ 14. Appro ☐ 15. Toxic	ved Food or Color A Chemicals	dditives	
FOOD FROM APPROVED SOURCE ☐ 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS ((Potentially Hazar	dous Foods)
5. Receiving/Condition		ng Temperatures		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	_		
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin			
PROTECTION FROM CONTAMINATION		nd Cold Holding		
8. Separation/Segregation/Protection	_	as a Public Health Co		
9. Food Contact Surfaces Cleaning and Sanitizing		I TS FOR HIGHLY-SUS and Food Preparation		LATIONS (HSP)
10. Proper Adequate Handwashing	CONSUMER A			
11. Good Hygienic Practices	22. Posting	g of Consumer Advis	sories	
Violations Related to Good Retail Practices_ (Blue tems) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo and Risk F	Violated Provision Province Illnesses Interactors (Red Items	erventions s 1-22):	
mmediately or within 90 days as determined by the Board of Health.	today, the it 590.000/fed	der for Correction tems checked indicateral Food Code. T	cate violations This report, whe	of 105 CMR en signed belov
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)	order of the cited in this	of Health member Board of Health. I report may result	Failure to corre in suspension	ect violations or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	establishme have a right	tablishment permit ent operations. If a t to a hearing. You	ggrieved by thi Ir request must	s order, you be in writing
29. Special Requirements (590.009) 30. Other	within 10 da	ted to the Board of ays of receipt of thi E-INSPECTION:		above address
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Inspector's Signature: Print:	1100	am		
PICs Signature: Print:	Allei Go	220	Page	of Pages

City Hall 375 Merrimack Street Lowell, MA

Lowell Board of Health		/ Tel.: 978	 -674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Come	Ked Fax: 978	-446-7103
Name Chestnut Square after School Address 77 Cl. 1/1 L S	Date 9/19/19 Risk	Type of Operation(s) D Food Service Retail	Type of Inspection Routine Re-inspection
TT MESTING ST.	Level	Residential Kitchen	Previous Inspection
Telephone 978-454-2870		Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer Bed & Breakfast	☐ Pre-operation ☐ Suspect Illness ☐ Congred Compleint
Person-in-Charge (PIC) Lla feren.	Time In:	Ded & Dieaklast	☐ General Complaint☐ HACCP
Inspector LISA SAM	Out:	Permit No.	Other
Each violation checked requires an explanation on the nar	rative page(s) a	nd a citation of specific	provision(s) violated.
Water Temp 126° Serve-Safe Cert Number		Non-c	compliance with:
Violations Related to Foodborne Illness Interventions an (Red Items)	d Risk Factors-	ServSafe Pest Control	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and r corrective action as determined by the Board of Health.	equire immediat	e Anti-Chokin Tobacco Allergen Aw	590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT	12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH		FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		oved Food or Color Additives	
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			
4. Food and Water from Approved Source		RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition		ing Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehe	ating	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolii	ng	
PROTECTION FROM CONTAMINATION	☐ 19. Hot a	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HS	, ,
10. Proper Adequate Handwashing	CONSUMER A	ADVISORY	
11. Good Hygienic Practices	22. Postir	ng of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board		f Violated Provisions Rel orne Illnesses Interventio	
of Health. Non-critical (N) violations must be corrected		Factors (Red Items 1-22):	
immediately or within 90 days as determined by the Board		der for Correction: Based	•
of Health.		tems checked indicate viol deral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)		of Health member or its a	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure t	
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspertablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006)		ent operations. If aggrieve	
27. Physical Facility (FC-6)(590.007)		t to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ted to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this order. <i>E-INSPECTION</i> :	
S: 590InspectForm6-14.doc	DATEORK	LUI LUIIUII.	
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Inspector's Signature: Print:	LISA 8	MM	
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Lowell Board of Health Cambridge in

City Hall 375 Merrimack Street Lowell, MA

FOOD ESTABLISHMENT INSPECTION REPORT	10 year		8-674-4144 8-446-7103
Name Delle Mahal	Date 213 0119	Type of Operation(s) ☐ Food Service	Type of Inspection
Address 157) Alloming by 1006	Risk	Retail	Re-inspection
Telephone (978) 978-8985	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner (478) 133 103	HACCP Y/N	Temporary	☐ Pre-operation
Person-in-Charge (PIC)	Time	☐ Caterer☐ Bed & Breakfast	Suspect Illness General Complaint
	In:	Downit No.	HACCP
Inspector Cliff A Clubs	Out:	Permit No.	Other
Water Temp Serve-Safe Cert Number 573			
/-		Non	-compliance with:
Violations Related to Foodborne Illness Intervention (Red Items)	s and Risk Factors	5 - ServSafe Pest Contro	590.003 (A) 🗆
Violations marked may pose an imminent health hazard a corrective action as determined by the Board of Health.	and require immedia		ing 590.009 (E) □ 590.009 (F) □
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		vention of Contamination fror idwash Facilities	n Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded	☐ 14. Арр	N FROM CHEMICALS roved Food or Color Additive ic Chemicals	s
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPE	ERATURE CONTROLS (Potenti	ally Hazardous Foods)
5. Receiving/Condition		king Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Reh		
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Cool	_	
PROTECTION FROM CONTAMINATION		and Cold Holding	
8. Separation/Segregation/Protection	_	e as a Public Health Control :NTS FOR HIGHLY-SUSCEPTIE	RI E-DODIII ATIONIS (USD)
9. Food Contact Surfaces Cleaning and Sanitizing		d and Food Preparation for H	
☐ 10. Proper Adequate Handwashing	CONSUMER	ADVISORY	
☐ 11. Good Hygienic Practices	☐ 22. Post	ting of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. C N	To Foodb and Risk <i>Official O</i> today, the 590.000/fe	of Violated Provisions R corne Illnesses Intervent Factors (Red Items 1-22 order for Correction: Base items checked indicate vi	tions (2): ed on an inspection olations of 105 CMR port, when signed belov
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc	order of th cited in thi the food e establishm have a rigl and submi within 10 c	d of Health member or its to Board of Health. Failure is report may result in suspensively stablishment permit and conent operations. If aggrievent to a hearing. Your requestited to the Board of Health days of receipt of this order RE-INSPECTION:	to correct violations bension or revocation of essation of food ed by this order, you est must be in writing in at the above address
1 Callage Callage	Print: Jure A	Rivera:	Page of Pages

City Hall

375 Merrimack Street

Lowell Board of Health	00	Lowell, I	
FOOD ESTABLISHMENT INSPECTION REPORT	Compl	lame Tel.: 97	8-674-4144 8-446-7103
Name Dally Oahool	Date 9/17/19	Type of Operation(s) Food Service	Type of Inspection
Address 150 All bull of Delich	Řísk	Retail	Re-inspection
Telephone 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint
Inspector Palan Palan	In: Out:	Permit No.	HACCP Other
Each violation checked requires an explanation on the nar			
Water Temp Serve-Safe Cert Number 553539	∠ Expiration Num	nber 9-1-202	2,
Violations Related to Foodborne Illness Interventions and (Red Items)		Non-	-compliance with: 590.003 (A)
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat	e Anti-Choki Tobacco Allergen A	590.009 (F) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	14. Appro	oved Food or Color Additives	i
_	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	ally Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	-	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir		
PROTECTION FROM CONTAMINATION	_	nd Cold Holding	
8. Separation/Segregation/Protection	_	as a Public Health Control	U E DORUM ATIONIO (MOD)
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIB and Food Preparation for HS	, ,
10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Postin	g of Consumer Advisories	
Violations Related to Good Retail Practices (Blue tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board of Health.	To Foodbo and Risk F <i>Official Or</i>	F Violated Provisions Re orne Illnesses Interventi- factors (Red Items 1-22) der for Correction: Base tems checked indicate vio	ons : ed on an inspection
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other St. 590(InspectForm6-14,doc	590.000/fed by a Board order of the cited in this the food es establishme have a right and submitt within 10 da	deral Food Code. This report Health member or its as Board of Health. Failure report may result in suspitablishment permit and control operations. If aggrieve to a hearing. Your requested to the Board of Health ays of receipt of this order E-INSPECTION:	port, when signed below agent constitutes an to correct violations bension or revocation of essation of food ed by this order, you est must be in writing an at the above address
Inspector's Signature:	A	1 8 1/2 2	_

Print:

PICs Signature:

Lowell Board of Health

Compliana

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	00.77		3-446-7103
Name Delay School	Date 3-19	Type of Operation(s) ☐ Food Service	Type of Inspection
Address 150 dio mina voltare	Risk	☐ Retail	Re-inspection
Telephone Q101-Q30-K904	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary Caterer	Pre-operation
Person-in-Charge (PIC)	Time	Bed & Breakfast	☐ Suspect Illness☐ General Complaint
Inspector ALARAA PILAA	In: Out:	Permit No.	☐ HACCP☐ Other
Each violation checked requires an explanation on the r			
Water Temp — Serve-Safe Cert Number 15535	29/ Expiration Num	ber 9-1-2022	
Violations Related to Foodborne Illness Interventions a		Non-o ServSafe	compliance with: 590.003 (A)
(Red Items)		Pest Control	590.007 □
Violations marked may pose an imminent health hazard an corrective action as determined by the Board of Health.	d require immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from F	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	vash Facilities	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded		ved Food or Color Additives	
FOOD FROM APPROVED SOURCE	☐ 15. Toxic	Chemicals	
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition	<u></u>	ng Temperatures 	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	_	`
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Cooling	-	
PROTECTION FROM CONTAMINATION		d Cold Holding	
8. Separation/Segregation/Protection		s a Public Health Control TS FOR HIGHLY-SUSCEPTIBL	E. DODIJI ATIONS (HSD)
9. Food Contact Surfaces Cleaning and Sanitizing		and Food Preparation for HSF	
10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	☐ 22. Posting	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue tems) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	Violated Provisions Rela rne Illnesses Interventio actors (Red Items 1-22):	10 00
mmediately or within 90 days as determined by the Board		der for Correction: Based	on an inspection
of Health.		ems checked indicate viol	
23. Management and Personnel (FC-2)(590.003)		leral Food Code. This repo of Health member or its ag	
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure to	o correct violations
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe ablishment permit and ces	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)	establishme	ent operations. If aggrieved	d by this order, you
28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your requesed to the Board of Health	
29. Special Requirements (590.009)	within 10 da	ys of receipt of this order.	
30. Other S: 590InspectForm6-14.doc	DATE OF RE	E-INSPECTION:	
0 0 1	Λ	-0'	
Inspector's Signature: UMA (Vla Pri	Huer	Kivera	
PICs Signature: John Land Colored Pri	nt: Trace Ca	animalania e	Page of Pages

City Hall

375 Merrimack Street Lowell, MA

FOOD ESTABLISHMENT INSPECTION REPORT	Comp	Plane Tel.: 978-674-4144 Fax: 978-446-7103			
Name 10 4 1 1	Date ,	Type of Operation(s)	Type of Inspection		
Address 157 11 1 20 10 de 1	9/12/19	Retail	Routine		
150 Allany Street	Risk ' `	Residential Kitchen	Re-inspection Previous Inspection		
Telephone (978) 937-8985		Mobile	Date:		
Owner	HACCP Y/N	│	│		
Person-in-Charge (PIC)	Time	☐ Bed & Breakfast	General Complaint		
Inspector (1111) A PICE	In: Out:	Permit No.	☐ HACCP ☐ Other		
Each violation checked requires an explanation on the narra		nd a citation of specific	provision(s) violated		
Water Temp 40° Serve-Safe Cert Number 553529	Expiration Num	ber 9-/-2822	_		
Violations Related to Foodborne Illness Interventions and		Non- ServSafe	compliance with: 590.003 (A)		
(Red Items)		Pest Contro Anti-Chokir			
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	Tobacco Allergen Av	590.009 (F)		
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from			
1. PIC Assigned/Knowledgeable/Duties	_	wash Facilities	Tidildo		
EMPLOYEE HEALTH			20		
☐ 2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS			
☐ 3. Personnel with Infections Restricted/Excluded	_	ved Food or Color Additives			
FOOD FROM APPROVED SOURCE	☐ 15. Toxic				
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	lly Hazardous Foods)		
5. Receiving/Condition		ng Temperatures			
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	-	6		
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	g			
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding			
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control			
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBI and Food Preparation for HS			
10. Proper Adequate Handwashing	CONSUMER A	·			
11. Good Hygienic Practices	_	g of Consumer Advisories			
/iolations Related to Good Retail Practices_ (Blue					
tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	Violated Provisions Re orne Illnesses Intervention actors (Red Items 1-22):	ons		
mmediately or within 90 days as determined by the Board	Official Ord	der for Correction: Base	d on an inspection		
f Health.		ems checked indicate vio			
C N 23. Management and Personnel (FC-2)(590.003)		leral Food Code. This rep of Health member or its a			
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure			
25. Equipment and Utensils (FC-4)(590.005)		report may result in susp			
26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ce			
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve to a hearing. Your reque			
28. Poisonous or Toxic Materials (FC-7)(590.008)		ed to the Board of Health			
29. Special Requirements (590.009)		lys of receipt of this order			
30. Other		-INSPECTION:			
5: 590InspectForm6-14.doc	Λ	2 K			
Inspector's Signature Print:	LIOVER	RIVEXA			
DICe Signature I -	ATUU LA	101,000	1 n		

9		City Haii 375 Meri	rimack Street
Lowell Board of Health	,	Lowell, N	
	compliced		3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Date	Type of Operation(s)	3-446-7103
Krishman Headen J	312)/18	Food Service	Type of Inspection ☑ Routine
Address 43 Frack St	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone	Level	☐ Mobile	Date:
Owner	HACCP Y/N	- ☐ Temporary ☐ Caterer	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (RIC)	Time	Bed & Breakfast	General Complaint
Inspector Miles	In: Out:	Permit No.	☐ HACCP ☐ Other
Each violation checked requires an explanation on the nar	rrative page(s) a	nd a citation of specific	provision(s) violate
Water Temp 120 Serve-Safe Cert Number 1030575		nber <u>\$122/18</u>	
Violations Related to Foodborne Illness Interventions an (Red Items)	d Risk Factors -	ServSafe Pest Control	compliance with: 590.003 (A) [590.007 [
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
 2. Reporting of Diseases by Food Employee and PIC 3. Personnel with Infections Restricted/Excluded 	14. Appro	oved Food or Color Additives	
	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cooki	ing Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea		
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolir	· ·	
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection	_	as a Public Health Control	E 202111 4515115 (1125)
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HS	
10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Postin	g of Consumer Advisories	
Violations Related to Good Retail Practices (Blue	Number of	Violated Provisions Rel	ated
Items) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board	To Foodbo	orne Illnesses Interventio	ons
f Health. Non-critical (N) violations must be corrected		factors (Red Items 1-22):	
nmediately or within 90 days as determined by the Board f Health.		der for Correction: Based ems checked indicate viol	
CN	590.000/fed	leral Food Code. This repo	ort, when signed belo
23. Management and Personnel (FC-2)(590.003)	•	of Health member or its aç Board of Health. Failure t	
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ces	
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieved to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008)		ed to the Board of Health	
29. Special Requirements (590.009)	within 10 da	ys of receipt of this order.	
30. Other	DATE OF RE	-INSPECTION:	
	2/ 1		T
Inspector's Signature: Print:	Aden P	1 Phillips	P
PICs Signature: Print:			Page of Pages
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City Hall 375 Merrimack Street Lowell, MA

Lowell Board of Health	1	Tel · 978	3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	pullis	Fax: 978	3-446-7103
Name Freshaman Academy	Date 0/10/18	Type of Operation(s) Food Service	Type of Inspection Routine
Address U.3 French SL	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (PIC) Michaela Gaulan	Time In:	Bed & Breakfast	General Complaint HACCP
Inspector)-mm/le	Out:	Permit No.	Other
Each violation checked requires an explanation on the nar	rative page(s) a	nd a citation of specific	provision(s) violated
Water Temp 120° Serve-Safe Cert Number 1573530	Expiration Num	nber 9/1/22 Non-	compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and re		ServSafe Pest Contro	590.003 (A) □ I 590.007 □
corrective action as determined by the Board of Health.	oquiro immodiat	Tobacco Allergen Av	590.009 (F) □ vareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	☐ 14. Approx	oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	ng	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time :	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		<mark>iтs For ні</mark> GHLY-susceртіві and Food Preparation for HS	
☐ 10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Postin	ig of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	f Violated Provisions Re orne Illnesses Interventic factors (Red Items 1-22):	ons
immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspeciForm6-14.doc	today, the ir 590.000/fed by a Board order of the cited in this the food es establishme have a right and submitted to destablishme the food submitted to destablish t	der for Correction: Base tems checked indicate vio deral Food Code. This rep of Health member or its a Board of Health. Failure report may result in suspitablishment permit and cent operations. If aggrieve to a hearing. Your requeted to the Board of Health ays of receipt of this order E-INSPECTION:	lations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of ssation of food d by this order, you st must be in writing at the above address
Inspector's Signature: Print:	Linn	- fle-	
PICs Signature ATTO a of the faculty Print:	Michaela	Paculan	Page of Pages

			rimack Street		
Lowell Board of Health	\sim	Lowell, N	ЛА 3-674-4144		
FOOD ESTABLISHMENT INSPECTION REPORT	Com/1.		3-446-7103		
Name Freshman Academs	Date 9/30/19	Type of Operation(s) ✓ Food Service	Type of Inspection Routine		
Address 43 French 52	Risk	Retail Residential Kitchen	Re-inspection		
Telephone	Level	☐ Mobile	Previous Inspection Date:		
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness		
Person-in-Charge (PIC) Wichalla Paculan	Time	☐ Bed & Breakfast	General Complaint HACCP		
Inspector	In: Out:	Permit No.	Other		
Each violation checked requires an explanation on the na	rrative page(s) a	nd a citation of specific	provision(s) violated.		
Water Temp 100 Serve-Safe Cert Number 168 476/2	Expiration Num	ber 8/23/23			
Violations Related to Foodborne Illness Interventions an (Red Items)	d Risk Factors -	Non-to-	compliance with: 590.003 (A) 590.007		
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediate	Anti-Chokin Tobacco Allergen Aw	590.009 (F)		
FOOD PROTECTION MANAGEMENT	12. Prever	ntion of Contamination from I	-lands		
1. PIC Assigned/Knowledgeable/Duties	🗌 13. Handw	ash Facilities			
EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS			
Reporting of Diseases by Food Employee and Fig. Resonnel with Infections Restricted/Excluded	14. Approv	☐ 14. Approved Food or Color Additives			
FOOD FROM APPROVED SOURCE	15. Toxic (Chemicals			
4. Food and Water from Approved Source		ATURE CONTROLS (Potential	lly Hazardous Foods)		
5. Receiving/Condition		g Temperatures			
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Reheat				
7. Conformance with Approved Procedures/HACCP Plans	18. Cooling				
PROTECTION FROM CONTAMINATION	19. Hot and Cold Holding				
8. Separation/Segregation/Protection		s a Public Health Control rs For HiGHLY-SUSCEPTIBL	F-POPIII ATIONS (HSD)		
9. Food Contact Surfaces Cleaning and Sanitizing		nd Food Preparation for HSF	, , ,		
10. Proper Adequate Handwashing	CONSUMER A				
11. Good Hygienic Practices		of Consumer Advisories			
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbor and Risk Fa	Violated Provisions Rela ne Illnesses Interventio actors (Red Items 1-22):	ns		
immediately or within 90 days as determined by the Board of Health.		<i>ler for Correction:</i> Based ems checked indicate viol			
CN	590.000/fed	eral Food Code. This repo	ort, when signed below		
23. Management and Personnel (FC-2)(590.003)		of Health member or its ag Board of Health. Failure t			
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe			
26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ces			
27. Physical Facility (FC-6)(590.007)		nt operations. If aggrieved to a hearing. Your reques			
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)	and submitte	ed to the Board of Health			
29. Special Requirements (590.009)		ys of receipt of this orderINSPECTION:			
S: 590InspectForm8-14.doc	1				
Inspector's Signature: Print:	Jums	1,			
PICs Signature Challer aculan Print;		Paciulan	PageofPages		

Lowell Board of Health

Commission

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	UMPLI	Fax:	978-446-7103
Address 175 Comphill Dally School	Date // / /// // // // // Risk	Type of Operation(s) Tood Service Retail Residential Kitcher	Routine Re-inspection
Telephone (948) 937-2821	Level	Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	Suspect Illness
Person-in-Charge (PIC)	Time In:	Bed & Breakfast	General Complaint HACCP
Inspector (LUNIA RIVERA	Out:	Permit No.	Other
Each violation checked requires an explanation on the narr	ative page(s) a	and a citation of spec aber 18-22	
Water Temp // 30 Serve-Safe Cert Number /030594/8			Non-compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	ServSa Pest Co	
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat	e Anti-Cl Tobacc	hoking 590.009 (E) □
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties	Ξ	ention of Contamination i wash Facilities	from Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Reporting With Infactions Restricted/Evaluated		I FROM CHEMICALS oved Food or Color Addi	tives
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Poting Temperatures	entially Hazardous Foods)
5. Receiving/Condition	☐ 17. Rehe	,	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 18: Coolii	-	
7. Conformance with Approved Procedures/HACCP Plans		nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection		as a Public Health Cont	rol
☐ 9. Food Contact Surfaces Cleaning and Sanitizing			PTIBLE-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	CONSUMER A	and Food Preparation fo	л пог
☐ 11. Good Hygienic Practices		ng of Consumer Advisori	ies
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc	To Foodbe and Risk I Official Or today, the is 590.000/fee by a Board order of the cited in this the food es establishmen have a righ and submit within 10 decembers.	items checked indicate deral Food Code. This of Health member or a Board of Health. Fail is report may result in stablishment permit an ent operations. If aggret to a hearing. Your restablishment permit and the content of the columns of the colum	rentions -22): Based on an inspection e violations of 105 CMR s report, when signed below its agent constitutes an lure to correct violations suspension or revocation of nd cessation of food rieved by this order, you equest must be in writing ealth at the above address
Inspector's Signature: Walla Print:	Hurry	Kivena	
PICs Signature: Mad Bank Print:	/mich !	Beer	Page of Pages

City Hall 375 Merrimack Street

Lowell, MA

Lowell Board of Health Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	Comp	LIAMU Fax: 978	B-446-7103
Name CANALULE BOLLY School Address 1966 Camp 6418	Date 9/20/18	Type of Operation(s) Food Service Retail	Type of Inspection ☐ Routline ☐ Re-inspection
Telephone (G14) G30 2821	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner (478) 45/1-282/	HACCP Y/N	Temporary	☐ Pre-operation
		Caterer Bed & Breakfast	Suspect Illness General Complaint
Person-in-Charge (PIC)	Time In:		HACCP
Inspector Alle KIUSa	Out:	Permit No.	Other
Water Temp // 60 Serve-Safe Cert Number / 8476			
/ .		Non-	compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	d Risk Factors -	ServSafe Pest Contro	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and r corrective action as determined by the Board of Health.	equire immediat	Audi Ob alda	ng 590.009 (E) □ 590.009 (F) □
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ention of Contamination from wash Facilities	Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE ☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potentiang Temperatures	lly Hazardous Foods)
☐ 5. Receiving/Condition	☐ 17. Rehea		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir	-	
☐ 7. Conformance with Approved Procedures/HACCP Plans		ig nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection		as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBLE	, ,
☐ 10. Proper Adequate Handwashing	CONSUMER A	and Food Preparation for HS	, P
☐ 11. Good Hygienic Practices		ng of Consumer Advisories	
Violations Related to Good Retail Practices (Blue			
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	f Violated Provisions Re orne Illnesses Interventic Factors (Red Items 1-22)	ons
immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health.		tems checked indicate vic deral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health member or its a	igent constitutes an
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure report may result in susp	
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food es	tablishment permit and ce	essation of food
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve	
28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your reque ted to the Board of Health	
29. Special Requirements (590.009)	within 10 da	ays of receipt of this order	
30. Other S: 590InspeciForm6-14.doc	DATE OF R	E-INSPECTION:	
Δ	1	Ω	1
Inspector's Signature: Print:	Gereg	KIVELO.	
PICs Signature: () (17) // ha an 1517 Print.	111110	on and to 1	Page of Pages

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Kids Eading in Class.			City Hall			
Food permil 9 asy 2017		10	375 Merri	mack S	treet	
Lowell Board of Health	Commolia	. a. A.I	Lowell, M		4.4	
FOOD ESTABLISHMENT INSPECTION REPORT	Complia	incl	Tel.: 978- Fax: 978-			
Name C. A. O. A.	Date / 7	ype of Operati		Type of		tion
Gertrude Bailey perax	0/20/19	Food Service		Rout	ine	
Address 145 Campbell bull	Risk ' Level	☐ Retail ☐ Residential K	(itchen	☐ Re-ir Previous	s Inspectio	
Telephone (000) 931-2821		Mobile		Date:	·	
Owner (7/6)	HACCP Y/N	☐ Temporary ☐ Caterer		==	peratio ect Illne	
Person-in-Charge (PIC)		Bed & Break	fast	Gene	eral Con	
Inspector POOLOA RINDWA	In: Out:	ermit No.		☐ HAC		
Each violation checked requires an explanation on the narr		a citation of	specific r	provisio	n(s) vi	olated
Water Temp // Serve-Safe Cert Number 48476/	Expiration Numbe		-202	3	(0)	olatoa.
Violations Related to Foodborne Illness Interventions and				omplianc		
(Red Items)	RISK Factors		ServSafe Pest Control		590.003 590.003	3 (A) □ 7 □
Violations marked may pose an imminent health hazard and re	equire immediate	A	Anti-Choking	3	590.009	9 (E) 🗆
corrective action as determined by the Board of Health.			obacco Allergen Awa	areness		9 (F) □ 0 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12. Prevention	on of Contamina	ition from H	lands		
☐ 1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handwas	sh Facilities				
EMPLOYEE HEALTH	_					
Reporting of Diseases by Food Employee and PIC	PROTECTION FF					
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic Ch		, toditivos			
FOOD FROM APPROVED SOURCE			D /D - 442 - 11	11	.	
☐ 4. Food and Water from Approved Source	TIME/TEMPERAT		5 (Potentiali	y Hazard	ous Foo	ds)
☐ 5. Receiving/Condition	_					
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Reheatin	g				
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Cooling					
PROTECTION FROM CONTAMINATION	☐ 19. Hot and (
8. Separation/Segregation/Protection		a Public Health				
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMENTS 21. Food and				ATIONS	(HSP)
☐ 10. Proper Adequate Handwashing	CONSUMER ADV					
11. Good Hygienic Practices	22. Posting o	f Consumer Adv	visories			
Violations Related to Good Retail Practices_ (Blue						
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immediately or within 90 days as determined by the Board	Official Orde	r for Correction	o <i>n:</i> Based	l on an i	nspecti	ion
of Health.	today, the iten					
C N 23. Management and Personnel (FC-2)(590.003)	590.000/feder by a Board of					
24. Food and Food Protection (FC-3)(590.004)	order of the B					
25. Equipment and Utensils (FC-4)(590.005)	cited in this re					ation of
26. Water, Plumbing and Waste (FC-5)(590.006)	the food estab establishment					VOLL
27. Physical Facility (FC-6)(590.007)	have a right to					
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitted			at the at	ove ac	dress
29. Special Requirements (590.009)	within 10 days		nis order.			
S: 590InspectForm6-14.doc	DATE OF RE-II	J LOTION.				
Transatow's Stansatures A . A. A. A. I. I. S	1	9, , ,				
Inspector's Signature: Print:	sture A. K	civea		_		_
PICs Signature	VILL FIM	ente		Page_	_ of	Pages
and the second	- 2	2 B 32				

Lowell Board of Health

Connective action Regularity Complement

City Hall

375 Merrimack Street

Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	3-446-7103
Name Gulfrede Barly Stool	Date 9 / 12 / 19	Type of Operation(s) Food Service	Type of Inspection
Address 105 Campbulli 01:10	Risk	Retail	Re-inspection
Telephone (2015) 620 2 73	Level	Residential Kitchen Mobile	Previous Inspection Date:
(910) 951-2821		Temporary	Pre-operation
Owner	HACCP Y/N	☐ Caterer	Suspect Illness
Person-in-Charge (PIC)	Time In:	Bed & Breakfast	General Complaint HACCP
Inspector auch Ry Vela	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra			provision(s) violated.
Water Temp <u>#0</u> Serve-Safe Cert Number [684767]	Expiration Num	1ber 8-23-23	annullana suithe
Violations Related to Foodborne Illness Interventions and	Risk Factors -		compliance with: 590.003 (A) □
(Red Items)		Pest Contro	I 590.007 □
Violations marked may pose an imminent health hazard and re-	quire immediat	e Anti-Chokir	- , ,
corrective action as determined by the Board of Health.		Tobacco Allergen Av	590.009 (F) □ vareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12 Preve	ention of Contamination from	
1. PIC Assigned/Knowledgeable/Duties			Tidilos
2	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	☐ 14. Appro	oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMDES	RATURE CONTROLS (Potentia	lly Hazardous Foods)
4. Food and Water from Approved Source		ing Temperatures	ny Hazardous Poods)
☐ 5. Receiving/Condition	_		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	-	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	ng	
PROTECTION FROM CONTAMINATION	🗌 19. Hot ai	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time :	as a Public Health Control	Ø
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	NTS FOR HIGHLY-SUSCEPTIBI	LE-POPULATIONS (HSP)
10. Proper Adequate Handwashing	☐ 21. Food	and Food Preparation for HS	iP .
_	CONSUMER A		
11. Good Hygienic Practices	☐ 22. Postin	ng of Consumer Advisories	
/iolations Related to Good Retail Practices_ (Blue	Number of	f Violated Provisions Re	lated
tems) Critical (C) violations marked must be corrected		orne Ilinesses Interventic	
mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22)	0 0
mmediately or within 90 days as determined by the Board	Official Or	der for Correction: Base	d on an inspection
of Health.	• .	items checked indicate vio	
CN		deral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)		of Health member or its a Board of Health. Failure	
24. Food and Food Protection (FC-3)(590.004)		e board of nealth, railure s report may result in susp	
25. Equipment and Utensils (FC-4)(590.005)		stablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006)		ent operations. If aggrieve	
27. Physical Facility (FC-6)(590.007)		it to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ted to the Board of Health	
29. Special Requirements (590,009)		ays of receipt of this order E-INSPECTION:	7 , - 1
S: 590InspectForm6-14.doc	I DATE OF KI	L-MOFECTION. G	1 19/19
Λ	1	-0' 11	1, 1, 1,
Inspector's Signature Live Print: 9	rua4	Kilera.	
DIC- Simple Annual Company	11 11/100	20101	Dogo of Dogos

THE COMMONWEALTH OF MASSACHUSETTS

or Lowell

Discussion With Person in Charge: Establishment Name:_ Reference 590-00 C - Critical Item
R - Red Item 35 John Street 2nd floor Lowell, MA 01852 1000 Coolera DESCRIPTION OF VIOLATION / PLAN OF CORRECTION PLEASE PRINT CLEARLY Date: ally cine 9-1279 Re-inspection Scheduled Voluntary Compliance Corrective Action Required: Embargo Voluntary Disposal Board of Health Page: ONO Emergency Closure Emergency Suspension Employee Restriction / E Yes Date Verified

FCRM 7348 (REV. 7/2000)

Thin Com

Lowell Board of Health

Compliance.

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	3-446-7103
Name Gertride Brules School	Date 10-19	Type of Operation(s) Food Service	Type of Inspection
Address 17 - 1 11 01	Risk	Retail	Re-inspection
	Level	Residential Kitchen Mobile	Previous Inspection Date:
Telephone 448 - 431 - 2821 Owner	HACCP Y/N	Temporary	☐ Pre-operation
		│	Suspect Illness General Complaint
Person-in-Charge (PIC)	Time In:		HACCP
Inspector (Illu Killin	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation of specific	provision(s) violated.
Water Temp // Serve-Safe Cert Number 16847613	Expiration Num	ber <u>0-25-</u> 202.	Compliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -	ServSafe	590.003 (A)
(Red Items)		Pest Contro Anti-Chokir	
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediati	Tobacco Allergen Av	590.009 (F) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	🗌 13. Handı	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMPER	RATURE CONTROLS (Potentia	lly Hazardous Foods)
4. Food and Water from Approved Source		ng Temperatures	
5. Receiving/Condition	🗌 17. Rehea	ating	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	g	
7. Conformance with Approved Procedures/HACCP Plans	19. Hot ar	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	ITS FOR HIGHLY-SUSCEPTIB	LE-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	☐ 21. Food a	and Food Preparation for HS	P
11. Good Hygienic Practices	CONSUMER ADVISORY ☐ 22. Posting of Consumer Advisories		
	☐ 22. Postin	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected	Number of	Violated Provisions Re	lated
immediately or within 10 days as determined by the Board		orne Illnesses Interventi	
of Health. Non-critical (N) violations must be corrected		factors (Red Items 1-22)	
immediately or within 90 days as determined by the Board of Health.		<i>der for Correction:</i> Base tems checked indicate vic	
CN	590.000/fed	deral Food Code. This rep	ort, when signed below
23. Management and Personnel (FC-2)(590.003)		of Health member or its a	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure report may result in susp	
25. Equipment and Utensils (FC-4)(590.005)		tablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve	
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your reque	
29. Special Requirements (590.009)		ted to the Board of Health	
30. Other		ays of receipt of this order E-INSPECTION:	
S: 590inspectForm6-14.doc	0. 70		
Inspector's Signature IIIII PILL Print:	de car	-00 1100	
PICs Signature:	Salan	- Revera	Pageof Pages
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Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT	omplied	Lowell, M Tel.: 978	imack Street IA -674-4144 -446-7103
Name Greenhalge School Address 149 Ennell St Telephone	Date 3 (2 § / / § Risk Level	Type of Operation(s) ☐ Food Service ☐ Retail ☐ Residential Kitchen ☐ Mobile ☐ Temporary	Type of Inspection ☐ Routine ☐ Re-inspection Previous Inspection Date: ☐ Pre-operation
Owner	HACCP Y/N	☐ Caterer	Suspect Illness
Person-in-Charge (PIC) Evant / in (Anna)	Time In:	Bed & Breakfast	☐ General Complaint☐ HACCP
Inspector Allen McPL: line	Out:	Permit No.	Other
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation of specific ਪੀਸੀ ਹ	provision(s) violated
Water Temp Serve-Safe Cert Number 13489645 Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	l Risk Factors -	S(14/20 Non-o ServSafe Pest Control Anti-Chokin Tobacco	g 590.009 (E) 590.009 (F)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties	_	Allergen Aw ention of Contamination from wash Facilities	` '
EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC 3. Personnel with Infections Restricted/Excluded	PROTECTION	FROM CHEMICALS oved Food or Color Additives	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source 5. Receiving/Condition 6. Tags/Records/Accuracy of Ingredient Statements 7. Conformance with Approved Procedures/HACCP Plans		_	ly Hazardous Foods)
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection	20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HS	
☐ 10. Proper Adequate Handwashing☐ 11. Good Hygienic Practices	CONSUMER A	,	6
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	Violated Provisions Rel orne Illnesses Interventic actors (Red Items 1-22):	ons
mmediately or within 90 days as determined by the Board		der for Correction: Based	
23. Management and Personnel (FC-2)(590,003) 24. Food and Food Protection (FC-3)(590,004) 25. Equipment and Utensils (FC-4)(590,005) 26. Water, Plumbing and Waste (FC-5)(590,006) 27. Physical Facility (FC-6)(590,007) 28. Poisonous or Toxic Materials (FC-7)(590,008) 29. Special Requirements (590,009) 30. Other S: 590InspectForm6-14.doc	590.000/fed by a Board order of the cited in this the food est establishme have a right and submitt within 10 da	tems checked indicate violateral Food Code. This report of Health member or its again Board of Health. Failure to report may result in suspensional to a hearing. If aggrieved to a hearing. Your requested to the Board of Health ays of receipt of this order.	ort, when signed below gent constitutes an o correct violations ension or revocation of essation of food d by this order, you est must be in writing at the above address
Inspector's Signature: Print:	Adin 1	mighillips	
PICs Signature: Euggelia Ayganis Print:	Euggi'	lin Assanis	Page of Pages

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection Food Service Routine Re-inspection **Address** Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 139596 42 Expiration Number 9/9/3/ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) [ServSafe (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print:

Print:

Page

PICs Signature:

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection reenhalese Solverol 7/2/119 Food Service Routine **Address** Risk Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N ☐ Suspect Illness Caterer Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 125 Serve-Safe Cert Number 16894665 Expiration Number 9/5/23 Non-compliance with: 10/26/23 ServSafe Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 (Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH PROTECTION FROM CHEMICALS** 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signature: **Pages**

City Hall

City Hall 375 Merrimack Street **Lowell Board of Health** Lowell, MA Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine **Address** Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast Person-in-Charge (PIC) General Complaint Time ☐ HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 120° Serve-Safe Cert Number 16894665 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Violations marked may pose an imminent health hazard and require immediate Anti-Choking 590.009 (E) 🗆 Tobacco 590.009 (F) [corrective action as determined by the Board of Health. **Allergen Awareness** 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Items) Critical (C) violations marked must be corrected Number of Violated Provisions Related To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health. Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Page 1 of Pages

Inspector's Signature:

PICs Signature:

City Hall

Page __ of__

			rimack Street
Lowell Board of Health	_	Lowell, I	
FOOD ESTABLISHMENT INSPECTION REPORT	Compl	1.	8-674-4144 8-446-7103
Name	Date 1	Type of Operation(s)	Type of Inspection
James F. Sullivan School	3/19/18	Food Service	Routine
Address 150 Dragaer S.	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978-937-7685	25751	Mobile Mobile	Date:
Owner	HACCP Y/N	├ ∏ Temporary │	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) Mary & Men Garnese	Time	Bed & Breakfast	General Complaint HACCP
Inspector LISA SAM	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number 10305146	Expiration Num	nber 8/22/18	Section at Windows 144
Violations Related to Foodborne Illness Interventions and		Non-	-compliance with: 590.003 (A) □
(Red Items)		Pest Contro Anti-Choki	ol 590.007 □
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	e Anti-Choki Tobacco Allergen Av	590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT	12. Preve	ention of Contamination from	the same of the sa
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		oved Food or Color Additives	3
3. Personnel with Infections Restricted/Excluded	15. Toxic		
FOOD FROM APPROVED SOURCE		RATURE CONTROLS (Potentia	ally Hazardous Foods)
4. Food and Water from Approved Source		ing Temperatures	my nazardous roods)
5. Receiving/Condition	☐ 17. Rehe		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir		
☐ 7. Conformance with Approved Procedures/HACCP Plans		-	
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection		as a Public Health Control ITS FOR HIGHLY-SUSCEPTIB	I E DODIJI ATIONS (USD)
9. Food Contact Surfaces Cleaning and Sanitizing		and Food Preparation for H	, ,
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11. Good Hygienic Practices	22. Postir	ng of Consumer Advisories	
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24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure	to correct violations
25. Equipment and Utensils (FC-4)(590.005)		report may result in susp	
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and co ent operations. If aggrieve	
27. Physical Facility (FC-6)(590.007)	have a right	t to a hearing. Your reque	est must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ted to the Board of Health	
30. Other		ays of receipt of this order E-INSPECTION:	•
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Inspector's Signature:

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Type of Operation(s) Name Type of Inspection Routine Food Service **Address** Re-inspection Retail Residential Kitchen Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Person-in-Charge (PIC) Bed & Breakfast General Complaint Time In: Inspector Other Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp ____/30°__ Serve-Safe Cert Number ______ Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors ServSafe 590.003 (A) 🗆 (Red Items) Pest Control 590.007 П Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC. ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17^{*}. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14,dac

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Inspector's Signatur

PICs Signature;

City Hall Lowell, MA

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Lowell Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT	Con	phied		-674-4144 -446-7103
Name James F. Sullivan School Address 150 Draper 81.	Date 2/14/19 Risk Level	Type of Opera Food Service Retail Residential Mobile	tion(s) ce	Type of Inspection Routine Re-inspection Previous Inspection Date:
Owner 978-93+-7685	HACCP Y/N	Temporary Caterer		Pre-operation Suspect Illness
Person-in-Charge (PIC) Many Ellyn Garnezu	Time	Bed & Brea	kfast	☐ General Complaint
Inspector / ISA SAM	In: Out:	Permit No.		HACCP Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citatipn o	f specific r	provision(s) violated
Water Temp Serve-Safe Cert Number 13489646	Expiration Num	ber <u>419</u> k	2	entra montro en marco
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -		ServSafe Pest Control	ompliance with: 590.003 (A) ☐ 590.007 ☐
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	е	Anti-Choking Tobacco Allergen Awa	590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamir	-	` '
1. PIC Assigned/Knowledgeable/Duties	🗌 13. Handv	wash Facilities		
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICAL	_S	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	ved Food or Colo	r Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTRO	LS (Potentiall	y Hazardous Foods)
5. Receiving/Condition	☐ 16. Cookir	ng Temperatures		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	ating		
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	g		
PROTECTION FROM CONTAMINATION	☐ 19. Hot an	nd Cold Holding		
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health	1 Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-S and Food Prepara		E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	CONSUMER A	•		
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24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)				o correct violations nsion or revocation o
26. Water, Plumbing and Waste (FC-5)(590.006)	the food est	tablishment per	mit and ces	sation of food
27. Physical Facility (FC-6)(590.007)				by this order, you the thick this be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitt	ed to the Board	of Health a	at the above address
29. Special Requirements (590.009)		lys of receipt of E -INSPECTION :	this order.	
S: 590InspecIForm6-14.doc	PAIL OF AL	o. Lonon.		
Inspector's Signature: Print:	1112 51	ma		
PICs Signature: M. B. Brint:	LIOPS UH	111		Page / of / Pages

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name vpe of Operation(s) Type of Inspection Food Service Routine Address Retail ☐ Re-inspection Residential Kitchen Previous Inspection Level Mobile Date: Temporary Pre-operation HACCP Y/N Owner Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number <u>B489645</u> Expiration Number <u>4/9</u> Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [**FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Pages

Inspector's Signature

PICs Signature

		City Hall	imack Street
Lowell Board of Health		Lowell, M	
Lowell Board of Health	Compliar	Tel.: 978	-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Date / in		-446-7103
Joseph G. Pune, School	3/21/18	Type of Operation(s) Food Service	Type of Inspection Routine
Address 145 Boulston S.	Risk [/] /	Retail Residential Kitchen	Re-inspection
Telephone 978-970-15491	Level	Mobile	Previous Inspection Date:
Owner .	HACCP Y/N	☐ Temporary ☐ Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) DE born Juggan	Time	Bed & Breakfast	General Complaint
DEDOTA SUTTINE	In:	Permit No.	☐ HACCP☐ Other
Each violation checked requires an explanation on the	Out: narrative page(s) at	1	
Water Temp 1200 Serve-Safe Cert Number 15585			provision(s) violatea.
Violations Related to Foodborne Illness Interventions	180 - 7	/ Non-c	compliance with:
(Red Items)	and Mak I actors	ServSafe Pest Control	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard a	nd require immediate	Anti-Choking Tobacco	g 590.009 (E) 590.009 (F)
corrective action as determined by the Board of Health.		Allergen Aw	rareness 590.000 (G)
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EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	14. Appro	ved Food or Color Additives	
	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cookir	ng Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ting	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	9	
PROTECTION FROM CONTAMINATION	☐ 19. Hot an	d Cold Holding	
8. Separation/Segregation/Protection	20. Time a	is a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		IS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	
☐ 10. Proper Adequate Handwashing	CONSUMER AI	•	۲
11. Good Hygienic Practices		g of Consumer Advisories	
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26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ces	
27. Physical Facility (FC-6)(590.007)		nt operations. If aggrieved to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitte	ed to the Board of Health	at the above address
29. Special Requirements (590.009)		ys of receipt of this order. FINSPECTION:	
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375 Merrimack Street Lowell, MA Lowell Board of Health Complied Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine Address Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast **General Complaint** Person-in-Charge (PIC Time HACCP In: Inspector Permit No. Other_ 15A SAM Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 15535392 xpiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Violations marked may pose an imminent health hazard and require immediate Anti-Choking 590.009 (E) 🗆 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control ☐ 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected and Risk Factors (Red Items 1-22): Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14 doc Inspector's Signature: Print: PICs Signature: Print:

City Hall

Page ___ of ___ Pages

Lowell Board of Health			owell, MA
FOOD ESTABLISHMENT INSPECTION REPORT	Com	1 . //	el.: 978-674-4144 ax: 978-446-7103
Name Joseph G. Pyne School Address 145 Rolloton St.	Date 3 14 19 Risk	Type of Operation Food Service Retail	Type of Inspection Contine Re-inspection
Telephone 978 - 970 - 5484	Level	Residential Kitc	hen Previous Inspection Date:
Owner	HACCP Y/N	│	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) DEBONN DUCC AN	Time	Bed & Breakfas	st 📗 General Complaint
Inspector / ISA Sam	In: Out:	Permit No.	☐ HACCP☐ Other
Each violation checked requires an explanation on the narra		nd a citation of sp	
Water Temp 130° Serve-Safe Cert Number 1553292	Expiration Num	ber 91100	(-) 1.0.0.0
Violations Related to Foodborne Illness Interventions and (Red Items)	•	Ser	Non-compliance with: vSafe 590.003 (A) □ t Control 590.007 □
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediat	Tob	i-Choking 590.009 (E) □ pacco 590.009 (F) □ prgen Awareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination	n from Hands
EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS	
☐ 3. Personnel with Infections Restricted/Excluded		ved Food or Color Ad Chemicals	lditives
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER		Potentially Hazardous Foods)
5. Receiving/Condition	☐ 17. Rehea		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	•	
7. Conformance with Approved Procedures/HACCP Plans	_	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	_	as a Public Health Co	entrol
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSC	CEPTIBLE-POPULATIONS (HSP)
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Inspector's Signature: Print:	1154 5	9m	

Print:

PICs Signature:

				vierrimack Street ell, MA
Lowell Board of Health	2			978-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	\cdot C	male	,	978-446-7103
Name Joseph G. Pune School	Date 9/11/19		of Operation(s) od Service	Type of Inspection Discoutine
Address 145 Poul Billion Billion	Risk		etail	Re-inspection
Telephone 978-990-5484	Level	=	esidential Kitchen obile	Date:
Owner 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	HACCP Y		emporary aterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC)	Time		ed & Breakfast	General Complain
Inspector LISASAM	In: Out:	Permit	No.	HACCP Other
Each violation checked requires an explanation on t	he narrative page(s) and a ci	itation of speci	ific provision(s) violate
Water Temp 1250 Serve-Safe Cert Number 1550			1/1/22	
Violations Related to Foodborne Illness Intervention (Red Items)	ons and Risk Facto	ors-	ServSar Pest Co	
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.		diate	Anti-Ch Tobacc	noking 590.009 (E)
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8. Separation/Segregation/Protection9. Food Contact Surfaces Cleaning and Sanitizing	REQUIRE	MENTS FOR		TIBLE-POPULATIONS (HSP)
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26. Water, Plumbing and Waste (FC-5)(590.006	⁾ establis			eved by this order, you
27. Physical Facility (FC-6)(590.007 28. Poisonous or Toxic Materials (FC-7)(590.008	have a	right to a h	earing. Your red	quest must be in writing
29. Special Requirements (590.008	onia odb			alth at the above address
30. Other		u days of r F RE-INSPE	eceipt of this or ECTION:	u e i.
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Lowell Board of Health	0.	Lowell, f	
FOOD ESTABLISHMENT INSPECTION REPORT	CON	I W A III I I I	8-674-4144 8-446-7103
Address 335 POWELL STATE Telephone (974) G377656 Owner Person-in-Charge (PIC) Inspector (JUMA KIMA	Date Diff // // Risk Level HACCP Y/N Time In: Out:	Type of Operation(s) Food Service Retail Residential Kitchen Mobile Temporary Caterer Bed & Breakfast Permit No.	Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation Suspect Illness General Complaint HACCP Other
Each violation checked requires an explanation on the name		nd a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number		nber	W
Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	d Risk Factors -	ServSafe Pest Contro	ng 590.009 (E) □ 590.009 (F) □
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ention of Contamination from wash Facilities	Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS oved Food or Color Additives Chemicals	*
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source 5. Receiving/Condition 6. Tags/Records/Accuracy of Ingredient Statements 7. Conformance with Approved Procedures/HACCP Plans PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection 9. Food Contact Surfaces Cleaning and Sanitizing 10. Proper Adequate Handwashing 11. Good Hygienic Practices	☐ 16. Cooki ☐ 17. Rehe. ☐ 18. Coolir ☐ 19. Hot ar ☐ 20. Time REQUIREMEN ☐ 21. Food CONSUMER A	ng nd Cold Holding as a Public Health Control ITS FOR HIGHLY-SUSCEPTIB and Food Preparation for HS	LE-POPULATIONS (HSP)
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590Inspeciform6-14.doc	To Foodbe and Risk F Official Order, the important of the cited in this the food estendishmen have a right and submitt within 10 dates.	f Violated Provisions Reprine Illnesses Interventing Factors (Red Items 1-22) der for Correction: Base tems checked indicate violated Food Code. This reprint and of Health member or its at Board of Health. Failure report may result in suspitablishment permit and count operations. If aggrieved to a hearing. Your requested to the Board of Health ays of receipt of this order E-INSPECTION:	ed on an inspection plations of 105 CMR port, when signed below agent constitutes an eto correct violations pension or revocation of essation of food ed by this order, you get must be in writing a at the above address
Inspector's Signature: PICs Signature: Print: Print:	Ques	Rivera.	Page of Pages

Lowell Board of Health

compliance

City Hall 375 Merrimack Street

Lowell, MA Tel.: 978-674-4144

TOOD LOTABLISHMENT MOPECTION REPORT		Fax: 978	3-446-7103
Name Laura Laur Mahad	Date 9 27/18	Type of Operation(s) ☐ Food Service	Type of Inspection
Address 125 October 100 I load	Risk	Retail	Reutine Re-inspection
Telephone St. D.33	Level	Residential Kitchen	Previous Inspection
Owner - 157 - 7655	HACOD VOI	│	Date: ☐ Pre-operation
	HACCP Y/N	Caterer	☐ Suspect Illness
Person-in-Charge (PIC)	Time In:	Bed & Breakfast	☐ General Complaint☐ HACCP
Inspector Cleun Rivera	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation of specific	provision(s) violated.
Water Temp Serve-Safe Cert Number	Expiration Num	iber	
Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and re-	•	ServSafe Pest Control	g 590.009 (E)
corrective action as determined by the Board of Health.		Allergen Aw	590.009 (F) □ rareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	12. Prever	ntion of Contamination from H	
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handw	vash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic (
FOOD FROM APPROVED SOURCE	TIME/TEMPER	RATURE CONTROLS (Potential)	ly Hazardoua Foods)
4. Food and Water from Approved Source		ng Temperatures	y mazardous Foous)
5. Receiving/Condition	☐ 17. Rehea		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Cooling	· ·	
7. Conformance with Approved Procedures/HACCP Plans		g d Cold Holding	
PROTECTION FROM CONTAMINATION		84	
8. Separation/Segregation/Protection		s a Public Health Control TS FOR HIGHLY-SUSCEPTIBL	E DODIN ATIONS (HOD)
9. Food Contact Surfaces Cleaning and Sanitizing		and Food Preparation for HSP	
10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	🗌 22. Posting	g of Consumer Advisories	
/iolations Related to Good Retail Practices (Blue	Name la comp	William III ma	
tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board		Violated Provisions Rela rne Illnesses Intervention	
of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22):	
mmediately or within 90 days as determined by the Board		der for Correction: Based	
of Health.	today, the ite	ems checked indicate viola leral Food Code. This repo	ations of 105 CMR
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health member or its ag	ภเ, when signed below aent constitutes an
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure to	o correct violations
25. Equipment and Utensils (FC-4)(590.005)	cited in this	report may result in suspe ablishment permit and ces	nsion or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006)	establishme	nt operations. If aggrieved	by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	to a hearing. Your reques	t must be in writing
29. Special Requirements (590.009)		ed to the Board of Health a	at the above address
30. Other		ys of receipt of this order.	
S: 590InspectForm6-14,doc	Λ	T	
Inspector's Signature: 11 1 M Pall My Print: (1 00000	1011111	
PICs Signature: Print:/	AMICA	VIVENO	Page of Pages
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Lowell Board of Health Complied

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	8-446-7103
Name Laun lie School	Date 4/25/19	Type of Operation(s) ☑ Food Service	Type of Inspection ✓ Routine
Address) 35 Powell St	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen	Previous Inspection
Owner	HACCD V/N	│	Date: Pre-operation
	HACCP Y/N	☐ Caterer	Suspect Illness
Person-in-Charge (PIC) W V V QUI I	Time In:	☐ Bed & Breakfast	General Complaint HACCP
Inspector Adam the Phillips	Out:	Permit No.	Other
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number	_ Expiration Num	nber	960
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	<i>Non-</i> ServSafe Pest Contro	590.003 (A)
Violations marked may pose an imminent health hazard and re	equire immediate	e Anti-Chokir	ng 590.009 (E)
corrective action as determined by the Board of Health.	qui a minicular	Tobac:co Allergen Av	590.009 (F) □ vareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12 Preve	ention of Contamination from	
1. PIC Assigned/Knowledgeable/Duties		wash Facilities	rianus
EMPLOYEE HEALTH	LJ 13. Hand	wash racililes	
Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS	
☐ 3. Personnel with Infections Restricted/Excluded		oved Food or Color Additives	
FOOD FROM APPROVED SOURCE	15. Toxic	Chemicals	
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potential	lly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cookii	ng Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	🗌 17. Rehea	ating	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	ıg	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
S. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	TS FOR HIGHLY-SUSCEPTIBL	E-POPULATIONS (HSP)
10. Proper Adequate Handwashing		and Food Preparation for HS	
-	CONSUMER A		
11. Good Hygienic Practices	22. Posting	g of Consumer Advisories	
Violations Related to Good Retail Practices (Blue	Number of	Violated Provisions Rel	lated
tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board		orne Ilinesses Interventic	
of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22):	
mmediately or within 90 days as determined by the Board		der for Correction: Based	
of Health.		tems checked indicate viol	
23. Management and Personnel (FC-2)(590.003)		leral Food Code. This repo of Health member or its a	
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure t	o correct violations
25. Equipment and Utensils (FC-4)(590.005)	cited in this	report may result in suspe	ension or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006)	establishme	ablishment permit and ce ent operations. If aggrieved	ssation of food d by this order, you
27. Physical Facility (FC-6)(590.007)		to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ed to the Board of Health	
29. Special Requirements (590.009) 30. Other		ys of receipt of this order. E-INSPECTION:	
S: 590InspeciForm6-14.doc	DAIL OF RE	. IIIOI LOTION.	
Inspector's Signature: Print:	0	r = 1 · 11	Т
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PICs Signature: / ammy Willaum Print:	1 ammy	MCHaulla	Page of Pages

Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT

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City Hall 375 Merrimack Street

Lowell, MA Tel.: 978-674-4144

Tel.: 978-674-4144 Fax: 978-446-7103

TOOD LOTABLISTIMENT INST LETION REPORT		Fax: 978	3-446-7103
Address 7 3 C 2001 11 12 12 12 12 12 12 12 12 12 12 12 12	Date	Type of Operation(s) ☐ Food Service ☐ Retail	Type of Inspection ☐ Routine ☐ Re-inspection
Dowell Wheet	Level	Residential Kitchen	Previous Inspection
Telephone (978) 937-7655		Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (PIC)	Time	☐ Bed & Breakfast	General Complaint
Inspector Ollie Riller.	ln: Out:	Permit No.	☐ HACCP☐ Other
Each violation checked requires an explanation on the narra		nd a citation of specific	
Water Temp Serve-Safe Cert Number 318857	Expiration Num	nber 1-30-26	compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	ServSafe Pest Contro	590.003 (A)
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediate	e Anti-Chokiı Tobacco Allergen Av	590.009 (E) 590.009 (F)
FOOD PROTECTION MANAGEMENT	🗌 12. Prever	ntion of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	vash Facilities	q.
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic (
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	ATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ting	
7. Conformance with Approved Procedures/HACCP Plans	🗌 18. Cooling	g	
PROTECTION FROM CONTAMINATION	☐ 19. Hot and	d Cold Holding	
8. Separation/Segregation/Protection	20. Time a	s a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBL	
☐ 10. Proper Adequate Handwashing		nd Food Preparation for HS	P
☐ 11. Good Hygienic Practices	CONSUMER At	DVISORY J of Consumer Advisories	
Violations Related to Good Retail Practices (Blue	22.1 Osting	g or consumer Advisories	
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. C N	To Foodbor and Risk Fa Official Ord today, the ite	Violated Provisions Rel rne Illnesses Intervention actors (Red Items 1-22): Iter for Correction: Based ems checked indicate vion eral Food Code. This rep	d on an inspection lations of 105 CMR
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	by a Board of order of the scited in this rather food estates establishment have a right and submitted within 10 day	of Health member or its age Board of Health. Failure to report may result in suspendishment permit and centre of the perations. If aggrieved to a hearing. Your requested to the Board of Health ys of receipt of this order.	gent constitutes an o correct violations ension or revocation of ssation of food d by this order, you st must be in writing at the above address
Inspectous Signatures ()	(A)	· · · · ·	
Inspector's Signature: PICs Signature: Print: Print:	XXXXX	- KIVERZ	,
I I I A CHEMALUIC. I IZT IINI INI I I I V V II IV I I I I I I I	1 41 40 44 /		LEGGO OF Doggo

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine Re-inspection Retail Address Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 13/88533 xpiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590,007 590.009 (E) 🗆 **Anti-Choking** Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590,004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. DATE OF RE-INSPECTION: 30. Other S: 590InspectForm6-14.doc Inspector's Signature Print: PICs Signature: Print:

City Hall

Lowell Board of Health		Lowell, N	
FOOD ESTABLISHMENT INSPECTION REPORT	(emp	, ,	8-674-4144 8-446-7103
Name LeBlanc Schaol	9/19/19	Type of Operation(s) D Food Service	Type of Inspection Decutine
Address 50 Sycamore St.	Risk 1 4	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978-970-5467	20001	Mobile	Date:
Owner	HACCP Y/N	│	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) SUNA J. Vergad	Time	Bed & Breakfast	General Complaint
Inspector KA Sam	In: Out:	Permit No.	HACCP Other
Each violation checked requires an explanation on the na		nd a citation of specific	provision(s) violated.
Water Temp 1200 Serve-Safe Cert Number 1378	piration Num	iber 5/24/20	5-00-0-000 - 1000
Violations Related to Foodborne Illness Interventions ar	nd Risk Factors -	Non- ServSafe	-compliance with: 590.003 (A)
(Red Items)		Pest Contro Anti-Chokir	ol 590.007 □
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediate	e Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	☐ 14. Appro	oved Food or Color Additives	;
FOOD FROM APPROVED SOURCE	☐ 15. Toxic	Chemicals	
4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	illy Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	□ 17. Rehea	_	
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolir		
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection		as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBI and Food Preparation for HS	, ,
☐ 10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Postin	g of Consumer Advisories	
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C N 23. Management and Personnel (FC-2)(590.003)	by a Board	leral Food Code. This rep of Health member or its a	igent constitutes an
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure report may result in susp	
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590,006) 27. Physical Facility (FC-6)(590,007)		ent operations. If aggrieve	
28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your reque ed to the Board of Health	
29. Special Requirements (590.009)	within 10 da	lys of receipt of this order	
30. Other S: 590InspectForm6-14.doc	DATE OF RE	E-INSPECTION:	
VIII STATE OF THE		^	
Inspector's Signature Print	LISA S	Am,	

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Type of Operation(s) Type of Inspection Food Service / Regtine Retail Re-inspection Residential Kitchen Previous Inspection Level Mobile Date: Temporary Pre-operation HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast General Complaint Time ☐ HACCP In: Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. __ Serve-Safe Cert Number _______ Expiration Number ___ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health. Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order.

DATE OF RE-INSPECTION:

Name

Address

Owner

Inspector

(Red Items)

EMPLOYEE HEALTH

of Health.

CN

30. Other

S: 590InspectForm6-14.doc

Telephone

Person-in-Charge (PIC

Water Temp 1250

Inspector's Signature Print: PICs Signature **Pages**

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name pe of Operation(s) Type of Inspection Food Service Routine Retail Re-inspection Address Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation HACCP Y/N Owner Caterer ☐ Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp _________ Serve-Safe Cert Number _________ Expiration Number _________ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [] FOOD PROTECTION MANAGEMENT 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Ilinesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Inspector's Signature

PICs Signature:

City Hall

375 Merrimack Street

Lowell Board of Health Lowell, MA Complian. Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection Food Service Routine **Address** ☐ Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp // Serve-Safe Cert Number /5735302 Expiration Number $\frac{5-1-2022}{1}$ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 \Box Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below \mathbf{c} N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590,004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

Inspector's Signature: Print: PICs Signature: **Print:** Page_ of Pages

Lowell Board of Health

compliance

City Hall 375 Merrimack Street

Lowell, MA Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT			3-446-7103
Name Lincoln School	Date 9 20 18	Type of Operation(s)	Type of Inspection
Address 3/1/ Challes (5/10)	Risk	Food Service	Routine Re-inspection
Telephone Court (427 2 262	Level	Residential Kitchen	Previous Inspection
978 9007-0102.		│	Date: ☐ Pre-operation
Owner	HACCP Y/N	Caterer	Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	☐ General Complaint ☐ HACCP
Inspector () 11/00 PILLONA	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the narr		nd a citation of specific	provision(s) violated
Water Temp // Serve-Safe Cert Number/553530			
Violations Related to Foodborne Illness Interventions and		Non-	compliance with:
(Red Items)	NISK I actors	ServSafe Pest Contro	590.003 (A) 🗆 590.007 🗆
Violations marked may pose an imminent health hazard and re	equire immediate	Anti-Chokin	g 590.009 (E)
corrective action as determined by the Board of Health.		Tobacco Allergen Av	590.009 (F) □ vareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from	Hands
☐ 1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	wash Facilities	
EMPLOYEE HEALTH	DROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			
4. Food and Water from Approved Source		RATURE CONTROLS (Potentiang Temperatures	ly Hazardous Foods)
☐ 5. Receiving/Condition		•	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	-	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	_	
PROTECTION FROM CONTAMINATION	_	nd Cold Holding	
8. Separation/Segregation/Protection	_	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBLE and Food Preparation for HS	. ,
☐ 10. Proper Adequate Handwashing	CONSUMER A	•	
☐ 11. Good Hygienic Practices		g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue			
Items) Critical (C) violations marked must be corrected		Violated Provisions Rel	
immediately or within 10 days as determined by the Board		rne Illnesses Interventic actors (Red Items 1-22):	
of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board		der for Correction: Base	11
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23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004)		of Health member or its a Board of Health. Failure	
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and ce	
27. Physical Facility (FC-6)(590,007)		ent operations. If aggrieve t to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitt	ed to the Board of Health	at the above address
29. Special Requirements (590.009)		ays of receipt of this order.	
S: 590/InspectForm6-14.doc	DATE OF RE	E-INSPECTION:	
	1	*	-
Inspector's Signature llu Print:	Junes	-NVeia	
PICs Signature: Marie Smith Print:	Ann MARIS	e Smith	Page of Pages

PICs Signature:

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection Food Service Routine Risk ☐ Re-inspection Retail Address Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.

Water Temp. 10 Serve-Safe Cert Number 14/18/35/3 Expiration Number 2-25-2022 Serve-Safe Cert Number 14/1353 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) 590.007 **Pest Control** Anti-Chokina 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other **DATE OF RE-INSPECTION:** S: 590InspectForm6-14.doc Inspector's Signature: **Print:**

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Lowell Board of Health	CORR	City Ha 201 (J. Lowell, Tel.: 9	errimack Street MA 78-674-4144
Name Address Telephone FOOD ESTABLISHMENT INSPECTION REPORT School Address School Address Addr	Date 9/19 Risk Level	Type of Operation(s) ☐ Food Service ☐ Retail ☐ Residential Kitchen ☐ Mobile	78-446-7103 Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation
Owner Person-in-Charge (PIC)	HACCP Y/N Time In:	☐ Temporary ☐ Caterer ☐ Bed & Breakfast	Suspect Illness General Complaint HACCP
Each violation checked requires an explanation on the Water Temp Serve-Safe Cert Number 573	Out: e narrative page(s) a		
Violations Related to Foodborne Illness Intervention (Red Items) Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	s and Risk Factors -	ServSafe Pest Cont Anti-Chol Tobacco	
FOOD PROTECTION MANAGEMENT ☐ 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination fror vash Facilities	m Hands
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS ved Food or Color Additive	es
FOOD FROM APPROVED SOURCE ☐ 4. Food and Water from Approved Source ☐ 5. Receiving/Condition	TIME/TEMPER	ATURE CONTROLS (Potenting Temperatures	tially Hazardous Foods)
☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 7. Conformance with Approved Procedures/HACCP Plans PROTECTION FROM CONTAMINATION ☐ 9. Conservice/Conservice/Contamination	☐ 18. Coolin ☐ 19. Hot an	-	
 8. Separation/Segregation/Protection 9. Food Contact Surfaces Cleaning and Sanitizing 10. Proper Adequate Handwashing 	REQUIREMEN 21. Food a	TS FOR HIGHLY-SUSCEPTI and Food Preparation for H DVISORY	, ,
☐ 11. Good Hygienic Practices Violations Related to Good Retail Practices_ (Blue tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board (Market West Properties 1/4)	Number of To Foodbo	g of Consumer Advisories Violated Provisions R rne Illnesses Interven actors (Red Items 1-22	tions
of Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590Inspector's Signature: Inspector's Signature:	today, the it 590.000/fed by a Board order of the cited in this the food est establishme have a right and submitt within 10 da DATE OF RE	der for Correction: Bastems checked indicate value of Health member or its Board of Health. Failur report may result in sustablishment permit and ent operations. If aggries to a hearing. Your required to the Board of Health ays of receipt of this order.	sed on an inspection riolations of 105 CMR eport, when signed below agent constitutes and to correct violations spension or revocation of cessation of food wed by this order, you usest must be in writing that the above address
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THE COMMONWEALTH OF MASSACHUSETTS

	1/2000)	10006/L A38/ B784 W803
☐ Voluntary Disposal ☐ Other		
☐ Embargo ☐ Emergency Closure		
☐ Re-inspection Scheduled ☐ Emergency Suspension		
☐ Voluntary Compliance ☐ Employee Restriction /		
e: Corrective Action Required: 🗓 No	Discussion With Person in Charge:	scussion Wit
		4
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pipe suisulation all tom muse be Repealed	L Louis	100,001
The second of th	3 /	
5	D	\$ 590-005
0) 1000		
Kitchen bourset sink hor not not not more Perelas	大	7 590-007
Stained Celing tile much Replace. OF	7	7 540-201
airrepair/ repair/ replace.	5	
Baysink in	37 R	1 2000
DESCRIPTION OF VIOLATION / PLAN OF CORRECTION PLEASE PRINT CLEARLY PLEASE PRINT CLEARLY PLEASE PRINT CLEARLY	C - Critical Item R - Red Item	Item Code No. Reference
School Date: 9-16	it Name:	Establishment Name:
City OF Lowell MA 01852 Board of Health		

Lowell, MA 4. Tel.: 978-674-4144

owell Board (of Health	compliance
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FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	-446-7103
Name Sala Salas	Date 10 10 19	Type of Operation(s) ☐ Food Service	Type of Inspection ☐ Routine
Address 300 Chelmsford Street	Risk	Retail	Re-inspection
Telephone (978) 931-2852	Level	Residential Kitchen Mobile	Previous Inspection Date:
	HACCP Y/N	Temporary	☐ Pre-operation
Owner		│	Suspect Illness General Complaint
Person-in-Charge (PIC)	Time In:		HACCP
Inspector Club Civera	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	and a citation of specific	provision(s) violated.
Water Temp/_///O Serve-Safe Cert Number/_553,530.2	Expiration Num	nber	compliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -	ServSafe	590.003 (A)
(Red Items) Violations marked may pose an imminent health hazard and re-	auire immediat	Pest Control Anti-Chokin	
corrective action as determined by the Board of Health.	quire immediat	Tobacco Allergen Aw	590.009 (F) ☐ vareness 590.000 (G) ☐
FOOD PROTECTION MANAGEMENT	☐ 12 Preve	ention of Contamination from I	, ,
1. PIC Assigned/Knowledgeable/Duties	_	wash Facilities	idildo
EMPLOYEE HEALTH	_		
Reporting of Diseases by Food Employee and PIC		N FROM CHEMICALS oved Food or Color Additives	
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE	_		16. 11d-va Faada)
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potential ing Temperatures	ily Hazardous Foods)
5. Receiving/Condition			
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	-	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	- <u>-</u>	
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection	_	as a Public Health Control NTS FOR HIGHLY-SUSCEPTIBI	LE DODILI ATIONS (USD)
9. Food Contact Surfaces Cleaning and Sanitizing		and Food Preparation for HS	•
10. Proper Adequate Handwashing	CONSUMER		
11. Good Hygienic Practices	22. Postir	ng of Consumer Advisories	
/iolations Related to Good Retail Practices_ (Blue	Number	f Violated Provisions Rel	lated
tems) Critical (C) violations marked must be corrected		orne Illnesses Interventic	
mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected		Factors (Red Items 1-22):	
mmediately or within 90 days as determined by the Board		rder for Correction: Base	•
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26. Water, Plumbing and Waste (FC-5)(590.006)	establishm	ent operations. If aggrieve	ed by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		nt to a hearing. Your reque tted to the Board of Health	
29. Special Requirements (590.009)		lays of receipt of this order	
30. Other		RÉ-INSPECTION:	
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Lowell Board of Health			Lowell, M	
FOOD ESTABLISHMENT INSPECTION REPORT	т (Consticu	/	3-674-4144 3-446-7103
Name Lovell Collegiate Chuter School		Date 4/10/18	Type of Operation(s) Food Service	Type of Inspection Routine
Address 1837 Middle sex 54	01	Risk	Retail	Re-inspection
Telephone 978.458-1399		Level	Residential Kitchen Mobile	Previous Inspection
Owner 9 0 13 9 9		HACCP Y/N	Temporary	Date:
Person-in-Charge (PIC) Can, Lystnom		Time	☐ Caterer☐ Bed & Breakfast	☐ Suspect Illness ☐ General Complaint
Inspector Junit le		In: Out:	Permit No.	☐ HACCP ☐ Other
Each violation checked requires an explanation on	the narra		nd a citation of specific	
Water Temp Serve-Safe Cert Number	3270	Expiration Num	ber 4/5/20	proviolon(s) violatet
Violations Related to Foodborne Illness Intervention			Non-o ServSafe	compliance with: 590.003 (A)
(Red Items)			Pest Control Anti-Chokin	590.007
Violations marked may pose an imminent health hazar corrective action as determined by the Board of Health		quire immediate	Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT		12. Preve	ntion of Contamination from I	
1. PIC Assigned/Knowledgeable/Duties		13. Handy	wash Facilities	
EMPLOYEE HEALTH		PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		🗌 14. Appro	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded		15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition			ng Temperatures	
-		☐ 17. Rehea	ating	
6. Tags/Records/Accuracy of Ingredient Statements		☐ 18. Coolin	g	
7. Conformance with Approved Procedures/HACCP Plan	าร	☐ 19. Hot an	d Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection		☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing			TS FOR HIGHLY-SUSCEPTIBL	
☐ 10. Proper Adequate Handwashing		☐ 21. Food a	and Food Preparation for HSI	5
☐ 11. Good Hygienic Practices		CONSUMER A	DVISORY g of Consumer Advisories	
		22. 1 030110	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Boal of Health. Non-critical (N) violations must be corrected	rd	To Foodbo	Violated Provisions Rela rne Illnesses Interventio actors (Red Items 1-22):	
mmediately or within 90 days as determined by the Boar	rd		der for Correction: Based	
of Health.			ems checked indicate viol eral Food Code. This repo	
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24. Food and Food Protection (FC-3)(590.004	•		Board of Health. Failure to	
25. Equipment and Utensils (FC-4)(590.005	5)		report may result in suspe ablishment permit and ces	
26. Water, Plumbing and Waste (FC-5)(590.006			nt operations. If aggrieved	
27. Physical Facility (FC-6)(590.007 28. Poisonous or Toxic Materials (FC-7)(590.008		have a right	to a hearing. Your reques	t must be in writing
29. Special Requirements (590.000	•		ed to the Board of Health a ys of receipt of this order.	at the above address
30. Other	•		-INSPECTION:	
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Inspector's Signature:	Print:	Jun 1	,	
DICs Signatures	Dulmte	July C/4		Page of Dans

City Hall 375 Merrimack Street Lowell, MA

Lowell	Board	of Health
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FOOD ESTABLISHMENT INSPECTION REPORT	г (Comp/1	el		3-674-414 3-446-710	
Name Lowell Collegiate Charter Address 183> Middle ser SZ Telephone	School	Date 10/24/18 Risk Level	Type of Opera Food Servic Retail Residential Mobile	tion(s) ce	Type of Routi Re-in Previous Date:	Inspection ne spection Inspection
Owner		HACCP Y/N	Temporary Caterer		☐ Pre-o	peration ect Illness
Person-in-Charge (PIC) CHRISTOPHIN BAKEN	_	Time	Bed & Brea	kfast	☐ Gene	ral Complaint
Inspector Immy 6		In: Out:	Permit No.		☐ HAC	
Each violation checked requires an explanation on t	the narra	tive page(s) a	nd a citation o	f specific	provisio	n(s) violated
Water Temp 122° Serve-Safe Cert Number 12	173720	Expiration Num	ber <u>4/5/2</u>	<u> </u>		
Violations Related to Foodborne Illness Interventio (Red Items)				Non-o	compliance	e with: 590.003 (A) 590.007
Violations marked may pose an imminent health hazar corrective action as determined by the Board of Health	d and req	juire immediate	Э	Anti-Chokin Tobacco Allergen Aw	•	590.009 (E) 590.009 (F) 590.000 (G)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		_	ntion of Contamin /ash Facilities	ation from h		
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Booting U.S. Indianal Processing States of Piccolar Processing Piccolar Processing S			FROM CHEMICAL			
3. Personnel with Infections Restricted/Excluded		☐ 15. Toxic (Chemicals			
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5. Receiving/Condition		☐ 17. Rehear				
☐ 6. Tags/Records/Accuracy of Ingredient Statements		☐ 18. Cooling	•			7
7. Conformance with Approved Procedures/HACCP Plans	s		d Cold Holding			
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection		☐ 20. Time a	s a Public Health			
9. Food Contact Surfaces Cleaning and Sanitizing			TS FOR HIGHLY-S nd Food Prepara			TIONS (HSP)
10. Proper Adequate Handwashing		CONSUMER A	92	don lor rior		
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owell Board of Health		Lowell, MA
	Coulled	Tel.: 978-674
OOD ESTARI ISHMENT INSPECTION REPORT	1 stilled	Fav. 070 440

FOOD ESTABLISHMENT INSPECTION REPORT	т (suffer	2	Fax: 978		
Name Love / Collegiada Charter		Date	Type of Opera	tion(s)	Type of	Inspection
Address		<u> </u>	Food Service	ce	Routi	ine Ispection
Telephone 1837 M. Addass S	1	Level	Residential	Kitchen		Inspection
			│	J.	Date:	tia
Owner		HACCP Y/N	Caterer			peration ect Illness
Person-in-Charge (PIC) Aby Suil Mulph	~	Time	Bed & Brea	kfast	☐ Gene	eral Complaint
Inspector Jimsh		ln: Out:	Permit No.		HAC	
Each violation checked requires an explanation on			nd a citation o	f specific		
Water Temp 220 Serve-Safe Cert Number 121	73220	Expiration Num	her 4/5/4	0	p. 0 1.0.0	ii(o) violated
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(Red Items)	nis and iti	ISK Faciors		ServSafe Pest Control		590.003 (A) □ 590.007 □
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corrective action as determined by the Board of Health	١.			Tobacco Allergen Aw	areness	590.009 (F) □ 590.000 (G) □
FOOD PROTECTION MANAGEMENT		12. Preve	ntion of Contamin	ation from H	lands	
☐ 1. PIC Assigned/Knowledgeable/Duties		☐ 13. Handv	vash Facilities			
EMPLOYEE HEALTH		PROTECTION	FROM CHEMICAL	c		
☐ 2. Reporting of Diseases by Food Employee and PIC			ved Food or Colo	-		
3. Personnel with Infections Restricted/Excluded		☐ 15. Toxic (
FOOD FROM APPROVED SOURCE				C (D -44i-1		
☐ 4. Food and Water from Approved Source			ATURE CONTROL ig Temperatures	-S (Potential	ly Hazardo	ous Foods)
5. Receiving/Condition		☐ 17. Rehea				
☐ 6. Tags/Records/Accuracy of Ingredient Statements			_			
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PROTECTION FROM CONTAMINATION		_	d Cold Holding			
8. Separation/Segregation/Protection			s a Public Health			
☐ 9. Food Contact Surfaces Cleaning and Sanitizing		REQUIREMENT	TS FOR HIGHLY-S nd Food Prepara	USCEPTIBL	E-POPULA	ATIONS (HSP)
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f Health.	-	today, the ite	ems checked in	dicate viola	ations of	105 CMR
C N C2 Management 15		590.000/fed	eral Food Code	. This repo	ort, when	signed below
23. Management and Personnel (FC-2)(590.003)		by a Board of	of Health memb	er or its ag	ent cons	titutes an
24. Food and Food Protection (FC-3)(590.004)			Board of Health report may resu			
25. Equipment and Utensils (FC-4)(590.005)		the food esta	ablishment perr	nit and ces	sation of	food
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)		establishme	nt operations. If	aggrieved	by this c	order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		have a right	to a hearing. Yo	our reques	t must be	in writing
29. Special Requirements (590.009)			ed to the Board		at the abo	ove address
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Inspector's Signature:	Print:	Jun	ngle			

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Lowell, MA Tel: 978-674-4144

Lowell Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT	. (Suf!	ref		Fax: 978			
Address 183> Middleses St.	//	Date G <i>/39/19</i> Risk Level	VZ F	of Opera ood Servic Retail Residential	ce	Type of Routi	ine Ispectio	n
Telephone 978.458.1399 Owner		HACCP Y/N		lobile emporary aterer		Date: Pre-c	ect IIIne	ess
Inspector Sumple	I	Гіте n: Out:	Permi	ed & Brea t No.	kfast	☐ HAC		ıplaint
Each violation checked requires an explanation on t	he narrati	ive page(s) a	nd a c	itation o	f specific	provisio	n(s) vi	olated.
Water Temp Serve-Safe Cert Number								
Violations Related to Foodborne Illness Intervention (Red Items) Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	d and requ		Э		Non-co ServSafe Pest Control Anti-Choking Tobacco Allergen Awa	g	e with: 590.003 590.007 590.009 590.009	7
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		☐ 12. Prever			-			(-/ -
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		PROTECTION 14. Approx 15. Toxic (FROM ved Foo	CHEMICAL od or Colo		2)		
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PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection ☐ 9. Food Contact Surfaces Cleaning and Sanitizing		20. Time a	TS FOR	R HIGHLY-S	SUSCEPTIBL		ATIONS	(HSP)
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Inspector's Signature:	Print:	Jun	16				-	
PICs Signature:	Print:	4000				Page	ofI	?ages

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 complied FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Date Type of Inspection 3127118 Food Service Routine **Address** Retail Re-inspection Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Pre-operation Temporary Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 120° Serve-Safe Cert Number 1531304 Expiration Number 9///22 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [(Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signatur Print: Pages

Lowell Board of Health Correction

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	1-21.02 /00	Fax: 97	8-446-7103
Name Cowell High Caté	Date 9/10/18	Type of Operation(s) Food Service	Type of Inspection Routine
Address	Risk	│	Re-inspection
Telephone 978. 937.8955	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary	Pre-operation
\cap		│	Suspect Illness General Complaint
Person-in-Charge (PIC) Fauly Tinde	Time In:		HACCP
Inspector Simmy 6	Out:	Permit No.	Other
Each violation checked requires an explanation on the na	rrative page(s) a	and a citation of specific	provision(s) violated
Water Temp / Serve-Safe Cert Number / 13530	夕 Expiration Num	nber <u>4/1/22</u> Nor	-compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	d Risk Factors-	ServSafe Pest Control	590.003 (A) 🗆 590.007 🗆
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediat	e Anti-Choki Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	i i
1. PIC Assigned/Knowledgeable/Duties		wash Facilities	
EMPLOYEE HEALTH	PROTECTION	LEDOM CHEMICAL C	
☐ 2. Reporting of Diseases by Food Employee and PIC		I FROM CHEMICALS oved Food or Color Additives	•
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	ally Hazardous Foods)
5. Receiving/Condition	🗌 16. Cooki	ing Temperatures	
G. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating	
	☐ 18. Coolir	ng	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot aı	nd Cold Holding	
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
☐ 9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	TS FOR HIGHLY-SUSCEPTIB	LE-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	☐ 21. Food	and Food Preparation for HS	SP
11. Good Hygienic Practices	CONSUMER A		
	☐ 22. Postin	ng of Consumer Advisories	No.
Critical (C) violations marked must be corrected mediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	To Foodbo and Risk F Official Oratoday, the it 590.000/fed by a Board order of the cited in this the food est establishme have a right and submitt within 10 da	f Violated Provisions Reprine Illnesses Interventifactors (Red Items 1-22) der for Correction: Base tems checked indicate vioderal Food Code. This report Health member or its as Board of Health. Failure report may result in suspitablishment permit and content operations. If aggrieved to a hearing. Your requested to the Board of Health ays of receipt of this order E-INSPECTION:	ed on an inspection plations of 105 CMR port, when signed below agent constitutes an to correct violations ension or revocation of essation of food ad by this order, you st must be in writing at the above address
Inspector's Signature: Print:	——————————————————————————————————————	16	
PICs Signature: Print:	Poline	700100	Page / of Pages

THE COMMONWEALTH OF MASSACHUSETTS

Lowell

Establishment Name: Item Code C - Crit No. Reference R - Rec	Name: Out
7	R – Red Item
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scussion With	Discussion With Person in Charge:
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375 Merrimack Street Lowell, MA **Lowell Board of Health** Conflict Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection nuell High School Cafe Routine Food Service Retail Re-inspection **Address** Father Miciscott Blud Residential Kitchen Previous Inspection Level Telephone Mobile Date: ☐ Pre-operation Temporary Owner HACCP Y/N Suspect Illness Caterer Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp Serve-Safe Cert Number 15535709 Expiration Number 9 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-590.003 (A) [(Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print:

PICs Signature

City Hall

Pages

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of

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date 4/3 Type of Operation(s) Type of Inspection Food Service Routine Address Fally Merixette Retail Rísk ☐ Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 155-35-3 p.4 Expiration Number 4/20 ServSafe Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 (Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590,008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: **Print:** PICs Signature: 6 **Pages** Page of

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine Address Risk Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Non-compliance with: 8/14/28ervSafe Violations Related to Foodborne Illness Interventions and Risk Factors-590.003 (A) 🗆 (Red Items) Pest Control 590.007 Anti-Choking Violations marked may pose an imminent health hazard and require immediate 590.009 (E) 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health. Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: **Print:** PICs Signature: **Print:** Page **Pages**

City Hall

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Date Type of Inspection Food Service Routine Re-inspection Address Ŕisk Retail Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time HACCP in: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. " كىسلول Water Temp __ Serve-Safe Cert Number <u>パガタノ8</u> Expiration Number _ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH PROTECTION FROM CHEMICALS** 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health, Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signature: Page of **Pages**

City Hall

Address TO Dec CPL Sr Risk Level Today Productions Pro	Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT	ierrechine Lylon frees	City Hal 375 Me Lowell, Tel.: 97 Fax: 97	rrimack Street
Person-in-Charge (PIC) Person-in-Charge (P	Address 570 Beacon St	Date 9//9//9 Risk	Type of Operation(s) ☐ Food Service ☐ Retail ☐ Residential Kitchen	Routine Re-inspection Previous Inspection Date:
Inspector			☐ Caterer	Suspect Illness
Water Temp Serve-Safe Cert Number 73 7 7 7	Inspector Character Mutagon	In: Out:		HACCP Other
ServSafe Sepulon3 (A) ServSafe Sepulon3 (A) ServSafe Sepulon3 (A) S	Water Temp Serve-Safe Cert Number 1557 9318	ative page(s) a Expiration Num	ber 8/28/22	
1. PIC Assigned/Knowledgeable/Dutles EMPLOYEE HEALTH 2. Reporting of Diseases by Food Employee and PIC 3. Personnel with Infections Restricted/Excluded 4. Food and Water from Approved Source 4. Food and Water from Approved Source 5. Receiving/Condition 6. Tags/Records/Accuracy of Ingredient Statements 7. Conformance with Approved Procedures/HACCP Plans 7. Conformance with Approved Procedures/HACCP Plans 8. Separation/Segregation/Protection 9. Food Contact Surfaces Cleaning and Sanitizing 10. Proper Adequate Handwashing 11. Pood and Food Protection From Contains Market Procedures/HACCP Plans 12. Food and Food Properations (Protection From Contains Market Procedures/HACCP Plans Protection From Contains Market Procedures/HACCP Plans Protection From Contains Market Procedures/HACCP Plans Protection From Approved Food or Color Additives 13. Handwash Facilities 14. Approved Food or Color Additives 15. Toxic Chemicals 16. Cooking Temperatures 17. Reheating 18. Cooling 19. Hot and Cold Holding 19. Hot and Cold Holding 20. Time as a Public Health Control REQUIREMENTS For HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 21. Food and Food Preparation for HSP CONSUMER ADVISORY 22. Posting of Consumer Advisories Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22): 27. Food and Food Protection (FC-3)(590.003) 28. Poisonous or Toxic Materials (FC-5)(590.005) 28. Poisonous or Toxic Materials (FC-7)(590.006) 29. Special Requirements (FC-6)(590.007) 29. Special Requirements (FC-9)(590.007) 29. Special Requirements (FC-7)(590.008) 29. Special Requirements (FC-7)(590.009) 30. Other 30. O	(Red Items) Violations marked may pose an imminent health hazard and re-		ServSafe Pest Contro Anti-Choki Tobacco	590.003 (A)
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26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other SpoinspectForm6-14-doc Inspector's Signature: Print: The food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order. DATE OF RE-INSPECTION:	fiolations Related to Good Retail Practices_ (Blue ems) Critical (C) violations marked must be corrected namediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected namediately or within 90 days as determined by the Board Health. C N 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004)	Number of To Foodbor and Risk Fa Official Ord today, the ite 590.000/fede by a Board o order of the I cited in this r	Violated Provisions Relater Illnesses Intervention (Red Items 1-22): For For Correction: Based ems checked indicate violetal Food Code. This report Health member or its agreement of Health. Failure to the port may result in suspense.	d on an inspection lations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of
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Lowell Board of Health		Lowell, N	rimack Street MA
FOOD ESTABLISHMENT INSPECTION REPORT	en le	,	3-674-4144 3-446-7103
Name Mc Al. Le Short Address To T	Pate / 70/28/19	Type of Operation(s) Food Service	Type of Inspection ☐ Poutine
Dealon of	Risk / Careel	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone	<u></u>	│	Date:
Owner	HACCP Y/N	☐ Caterer	Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint HACCP
Inspector Simula	In: Out:	Permit No.	Other
Water Temp Serve-Safe Cert Number S5/91	ative page(s) a Expiration Num	ber <u>8788122</u>	
Violations Related to Foodborne Illness Interventions and (Red Items)		8/14/20 Non- ServSafe Pest Contro	compliance with: 590.003 (A) I 590.007
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediate	e Anti-Chokir Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from vash Facilities	
EMPLOYEE HEALTH		FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC	_	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic (Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		ATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition	☐ 17. Rehea	•	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Cooling		
7. Conformance with Approved Procedures/HACCP Plans		a Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	_	s a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBL	E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing		and Food Preparation for HS	P
11. Good Hygienic Practices	CONSUMER A	DVISORY g of Consumer Advisories	
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26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ce nt operations. If aggrieve	
27. Physical Facility (FC-6)(590.007)		to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)	and submitte	ed to the Board of Health	at the above address
30. Other		ys of receipt of this order. F-INSPECTION:	
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Inspector's Signature: Print:	Juny	t.	
PICs Signature: Print:	Orhorak	Juldanni	Page of Pages

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection 1 c Avinue 9/10/18 Food Service Routine Re-inspection **Address** Risk Retail DI Mainmost Ral Residential Kitchen Previous Inspection Level Telephone Mobile Date: ☐ Pre-operation Temporary Owner HACCP Y/N Caterer ☐ Suspect Illness ☐ Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 100 Serve-Safe Cert Number 15535248 Expiration Number 9 11122 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspeciForm6-14.doc Inspector's Signature: Print: PICs Signature: Print: **Pages** Page of Irsenault

City Hall

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection C ANNUE Food Service Routine Address Rísk Retail Re-inspection Manine Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast ☐ General Complaint Person-in-Charge (PIC) Time] HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 125 Serve-Safe Cert Number 553 5293 Expiration Number 9/1/22 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 **Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590inspectForm6-14.doc

Inspector's Signature:

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	1 .hu	375 Mer Lowell, I	rimack Street
Lowell Board of Health	Corrector Vac	Lowell, I	NA 8-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	ction Pec	Fax: 97	8-446-7103
Name McAvinne School	Date 9/9/19	Type of Operation(s) Food Service	Type of Inspection Routine
Address 13/ Manus th Pd	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone	Level	│	Date:
Owner	HACCP Y/N	- ☐ Temporary □ Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) Jeanne Arsenault	Time In:	☐ Bed & Breakfast	General Complaint HACCP
inspector / hum/	Out:	Permit No.	Other
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation of specific	provision(s) violate
Water Temp 125 Serve-Safe Cert Number 1830 9634	_ Expiration Num	ber	
Violations Related to Foodborne Illness Interventions and (Red Items) Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	Risk Factors -	ServSafe Pest Contro	590.009 (E) 590.009 (F)
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination from	· <i>'</i>
☐ 1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	wash Facilities	
EMPLOYEE HEALTH		FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
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7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin —		
PROTECTION FROM CONTAMINATION	☐ 19. Hot an	d Cold Holding	
8. Separation/Segregation/Protection	_	s a Public Health Control	
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11. Good Hygienic Practices		g of Consumer Advisories	
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nmediately or within 90 days as determined by the Board f Health.	Official Ord	ler for Correction: Based ems checked indicate viol eral Food Code. This repo	d on an inspection ations of 105 CMR
23. Management and Personnel (FC-2)(590.003)	by a Board o	of Health member or its ag	gent constitutes an
24. Food and Food Protection (FC-3)(590,004)	order of the	Board of Health. Failure t	o correct violations
25. Equipment and Utensils (FC-4)(590.005)	the food eets	eport may result in suspend ablishment permit and ces	ension or revocation o
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)	establishmer	nt operations. If aggrieved	by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	to a hearing. Your reques	t must be in writing
29. Special Requirements (590.009)		ed to the Board of Health and some solutions of receipt of this order.	at the above address
30. Other		INSPECTION:	
590InspectForm6-14.doc	1	2	
Inspector's Signature: Print:	-		
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Thui.	teanne A	sehault	- "50 orrages
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Board of Health 35 John Street 2nd floor Lowell, MA 01852

Establishment Name:_

Date Verified Emergency Suspension Employee Restriction / Exclusion Y Yes **Emergency Closure** ₽ Other °N O o o ٥ Page: Corrective Action Required: Re-inspection Scheduled town. Voluntary Compliance DESCRIPTION OF VIOLATION / PLAN ÓF CÓRRECTION Voluntary Disposal Embargo Mer. C. C PLEASE PRINT CLEARLY 1001 Date: whois Spine Stic Les mice does not conf 5 Cleaning cleaning Mc Alinne Evidence Hood Hanel 12004 Hood Discussion With Person in Charge: C - Critical Item R - Red Item 0 Code Reference F. - 3 FC 6 FC-6 Z Item No. $\hat{\sigma}$ 97

This Form Approved by the Department of Public Health

375 Merrimack Street **Lowell Board of Health** Lowell, MA Mea Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date / Type of Operation(s) Type of Inspection] Routine Food Service **Address** Retail Risk Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation HACCP Y/N Owner Caterer ☐ Suspect Illness ☐ Bed & Breakfast ☐ General Complaint Person-in-Charge (F Time □ HACCP In: Inspector Permit No. Other. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1833639 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [**FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health. Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signature: **Print:** Page of_ **Pages**

City Hall

Lowell Board of Health

Complied

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 9/8	-446-7103
Name Malloy School	Date 3 (27/8	Type of Operation(s) ☑ Food Service	Type of Inspection ☑ Routine
Address 125 Smith St	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) deane Holmes	Time	Bed & Breakfast	General Complaint HACCP
Inspector Adim Millies	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the	narrative page(s) a	nd a citation of specific	provision(s) violated
Water Temp / 100 Serve-Safe Cert Number / 1338 8	Y8Y Expiration Num	ber 3/26/11	ative.
Violations Related to Foodborne Illness Interventions (Red Items)	and Risk Factors -	/0/2/22 Non-o ServSafe Pest Control	590.003 (A) 590.007
Violations marked may pose an imminent health hazard ar corrective action as determined by the Board of Health.	nd require immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	lwash Facilities	
EMPLOYEE HEALTH	PROTECTION	I FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded		Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cooki	ing Temperatures	<
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	ng	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
☐ 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HS	
☐ 10. Proper Adequate Handwashing	CONSUMER A	•	
☐ 11. Good Hygienic Practices	22. Postin	ng of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590,004)	To Foodbo and Risk F Official Ord today, the it 590.000/fed by a Board order of the	f Violated Provisions Relorne Illnesses Intervention Factors (Red Items 1-22): der for Correction: Based tems checked indicate violed deral Food Code. This report of Health member or its age Board of Health. Failure to the content of the second se	d on an inspection lations of 105 CMR ort, when signed below gent constitutes an to correct violations
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe tablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006)	establishme	ent operations. If aggrieve	d by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your reques ted to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this order.	
30. Other		É-INSPECTION:	
S: 590InspecIForm6-14,doc			
Inspector's Signature: // Pr	int: Alm W	1/1/1/1/1	
PICs Signature: Leanne Holmes Pr	int: Leanne	Holmes	Page of Pages

Lowell Board of Health

City Hall 375 Merrimack Street Lowell, MA

FOOD ESTABLISHMENT INSPECTION REPORT	. COM	plied		-674-4144 -446-7103
Name Malloy School	Da		Type of Operation(s)	Type of Inspection
A status a s	- 97 Ris	(1/18 sk	Food Service	RoutineRe-inspection
Telephone		vel	Residential Kitchen	Previous Inspection
			☐ Mobile☐ Temporary	Date: Pre-operation
Owner	HA	CCP Y/N	☐ Caterer	☐ Suspect Illness
Person-in-Charge (PIC) Aluxa Lecton	Tin	ne	Bed & Breakfast	☐ General Complaint ☐ HACCP
Inspector Adam M. Ph. Slips	Ou		Permit No.	Other
Each violation checked requires an explanation on the				provision(s) violated
Water Temp /20° Serve-Safe Cert Number //33	18484 Ex	piration Num		amalianas with
Violations Related to Foodborne Illness Intervention	ns and Risl	k Factors -	(6/1/) ServSafe	compliance with: 590.003 (A) □
(Red Items)			Pest Control Anti-Choking	590.007 □
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.		e immediate	Tobacco Allergen Awa	590.009 (F)
FOOD PROTECTION MANAGEMENT	[☐ 12. Prever	ntion of Contamination from H	lands
1. PIC Assigned/Knowledgeable/Duties	[☐ 13. Handw	vash Facilities	
EMPLOYEE HEALTH	F	ROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC			ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded		☐ 15. Toxic (
FOOD FROM APPROVED SOURCE	т	IMF/TEMPER	ATURE CONTROLS (Potential)	v Hazardous Foods)
4. Food and Water from Approved Source			ng Temperatures	y mazardous r oods,
5. Receiving/Condition	i	_]17. Rehea		
6. Tags/Records/Accuracy of Ingredient Statements	Γ	☐ 18. Cooling	_	
7. Conformance with Approved Procedures/HACCP Plans	S _		d Cold Holding	
PROTECTION FROM CONTAMINATION	_	_	s a Public Health Control	
8. Separation/Segregation/Protection			TS FOR HIGHLY-SUSCEPTIBL	F.DODIII ATIONS (USD)
9. Food Contact Surfaces Cleaning and Sanitizing			and Food Preparation for HSP	
☐ 10. Proper Adequate Handwashing		ONSUMER A		
11. Good Hygienic Practices		22. Posting	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected	ı	Number of	Violated Provisions Rela	ated
immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected			rne IIInesses Intervention actors (Red Items 1-22):	ns
immediately or within 90 days as determined by the Board	d (der for Correction: Based	
of Health.			ems checked indicate viola	
C N 23. Management and Personnel (FC-2)(590.003)			eral Food Code. This repo of Health member or its ag	
24. Food and Food Protection (FC-3)(590.004)	_		Board of Health. Failure to	
25. Equipment and Utensils (FC-4)(590.005)			report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006)	,		ablishment permit and ces nt operations. If aggrieved	
27. Physical Facility (FC-6)(590.007)	' F	nave a right	to a hearing. Your reques	t must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)	_		ed to the Board of Health a	at the above address
30. Other	•		ys of receipt of this order. <i>E-INSPECTION</i> :	
S: 590InspeciForm8-14.doc	_			
Inspector's Signature:	Print: 1	/	- M:11	Γ
PICs Signature: h	Print:	len r	Mailly S	Page of Pages
Monsim- fection	Time De	mna 1	relton	Pageof Pages

375 Merrimack Street Complied Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection 7/20/19 ▼ Food Service Routine **Address** Retail Re-inspection Risk Smi Residential Kitchen Previous Inspection Level Telephone Mobile Date: ☐ Pre-operation Temporary Owner HACCP Y/N Caterer ☐ Suspect Illness ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time Donna HACCP ☐ HACC In: Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 1300 ___ Serve-Safe Cert Number 13/88572 Expiration Number //36/2/ Non-compliance with: 10126 (2) Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [(Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print:

Print:

PICs Signature:

City Hall

Page___ of___ Pages

Lowell Board of Health

Complied

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	3-446-7103
Name Molloy School	Date 9//0/19	Type of Operation(s) ☑ Food Service	Type of Inspection ☑ Routine
Address 106 Smith St	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary	☐ Pre-operation
		│	Suspect Illness General Complaint
Person-in-Charge (PIC) DONNA J. VERGADOS	Time In:	Ded & Breaklast	HACCP
Inspector Adam MCLillys	Out:	Permit No.	Other
Water Temp / 20 Serve-Safe Cert Number 13/88 572	ative page(s) a Expiration Num	nber 1/30/2/	<u> </u>
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	// (2 (/) 2 Non- ServSafe Pest Contro	compliance with: 590.003 (A)
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediat	e Anti-Chokir Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT	12. Preve	ention of Contamination from	
1. PIC Assigned/Knowledgeable/Duties	13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC		oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMPER	RATURE CONTROLS (Potentia	IIIv Hazardous Foods)
4. Food and Water from Approved Source		ng Temperatures	
5. Receiving/Condition	☐ 17. Rehea	ating	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir	ng	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding	
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUȘCEPTIBI	` '
☐ 10. Proper Adequate Handwashing		and Food Preparation for HS	;P
11. Good Hygienic Practices	CONSUMER A	ADVISORY lig of Consumer Advisories	
Violations Related to Good Retail Practices (Blue	2,2.1 031311	ig of consumer Advisories	
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	To Foodbo and Risk F Official Ord today, the ii 590.000/fed by a Board order of the cited in this the food est	F Violated Provisions Reprine Illnesses Interventional Illnesses I	ons d on an inspection plations of 105 CMR port, when signed below agent constitutes an to correct violations ension or revocation of essation of food
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc Print:	have a right and submitt within 10 da	t to a hearing. Your reque ted to the Board of Health ays of receipt of this order E-INSPECTION:	est must be in writing at the above address
PICe Signature: 91	1	- 1/2 1 22 - 2	Page of Pages

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144 Fax: 978-446-7103 Type of Operation(s) Type of Inspection Food Service Routine Retail Re-inspection Residential Kitchen Previous Inspection Mobile Date: Temporary ☐ Pre-operation Caterer Suspect Illness ☐ Bed & Breakfast General Complaint ☐ HACCP Permit No. Other Non-compliance with: 590.003 (A) 🗆 ServSafe **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Tobacco 590.009 (F) Allergen Awareness 590.000 (G) [

Lowell Board of Health

Compliant FOOD ESTABLISHMENT INSPECTION REPORT Name **Address** Level Telephone Owner HACCP Y/N Person-in-Charge (PIC) Time In: Inspector Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 156778 76 xpiration Number Violations Related to Foodborne Illness Interventions and Risk Factors -(Red Items) Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health. FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1 PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection ☐ 20. Time as a Public Health Control REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

Inspector's Signature: Print: PICs Signature:

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name of Operation(s) Type of Inspection Food Service Routine Address Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast ☐ General Complaint Time Person-in-Charge (PIC) HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 15377876 Expiration Number Water Temp Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspecIForm6-14.doc

Print:

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Inspector's Signature:

PICs Signature:

City Hall

City Hall

			imack Street
Lowell Board of Health		Lowell, N	71A 3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Commi	, ,,	3-446-7103
Name Moody School	Date 19	Type of Operation(s) D Food Service	Type of Inspection Proutine
Address 15B Reserts S.	Risk	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 979 - 937 - 7473	Level	Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) Laura Hawes	Time	Bed & Breakfast	General Complaint
Inspector / 15A Saw	In: Out:	Permit No.	☐ HACCP ☐ Other
Each violation checked requires an explanation on th		nd a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number		nber 10/12/22	
Violations Related to Foodborne Illness Intervention (Red Items)	s and Risk Factors -	ServSafe	590.003 (A)
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	and require immediate	Pest Control Anti-Chokin Tobacco Allergen Aw	g 590.009 (E) 🗆 590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT ☐ 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from I	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS ved Food or Color Additives	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potential ng Temperatures	ly Hazardous Foods)
5. Receiving/Condition	☐ 17. Rehea	•	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Kenes	,	
☐ 7. Conformance with Approved Procedures/HACCP Plans		ช nd Cold Holding	
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection		as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	
☐ 10. Proper Adequate Handwashing☐ 11. Good Hygienic Practices	CONSUMER A	ADVISORY g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue		9 •• • • • • • • • • • • • • • • • • •	
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	Violated Provisions Rel orne Illnesses Interventio actors (Red Items 1-22):	
immediately or within 90 days as determined by the Board of Health.	today, the it 590.000/fed	der for Correction: Based tems checked indicate viol deral Food Code. This rep	lations of 105 CMR ort, when signed belo
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)	order of the	of Health member or its a Board of Health. Failure t report may result in suspe	o correct violations
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and ce ent operations. If aggrieve	
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	t to a hearing. Your requested to the Board of Health	st must be in writing
29. Special Requirements (590,009)	within 10 da	ays of receipt of this order.	
30. Other S: 590/InspectForm6-14,doc	DATE OF RE	E-INSPECTION:	
Ingrestorie Signature	n: /		
	Print: LISA SA	m	n / . /
PICs Signature: Laura Haures	Print: havra	Hewes	Page / of Pages

3		City Hall	l
*			rimack Street
Lowell Board of Health	Λ	Lowell, N	
FOOD ESTABLISHMENT INSPECTION REPORT	()	_/ /	8-674-4144 8-446-7103
Name M /. Sal	Date	Type of Operation(s)	Type of Inspection
Moody School	9/16/19	Food Service	Routine
Address 158 Koxeo 9'	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978 - 937 - 76 73	Level		Date:
Owner / Course // Course	HACCP Y/N	Temporary	Pre-operation
Person-in-Charge (PIC)	Time	│	Suspect Illness General Complaint
	In:		│
Inspector LISA SAM	Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	ative page(s) a	nd a citation of specific	provision(s) violated.
Water Temp 1200 Serve-Safe Cert Number 5077876	Expiration Num	ber 16/19/22	and the same of th
Violations Related to Foodborne Illness Interventions and	Risk Factors-	3/26/2/ServSafe	compliance with: 590.003 (A)
(Red Items)		Pest Contro	J 590.007 □
Violations marked may pose an imminent health hazard and recognitive action as determined by the Parada fills.	quire immediate	e Anti-Chokir Tobacco	ng 590.009 (E) □ 590.009 (F) □
corrective action as determined by the Board of Health.		Allergen Av	
FOOD PROTECTION MANAGEMENT	🗌 12. Preve	ention of Contamination from	Hands
	☐ 13. Handv	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			
4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea		
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	g	
PROTECTION FROM CONTAMINATION	☐ 19. Hot an	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing	_	TS FOR HIGHLY-SUSCEPTIBI	, ,
☐ 10. Proper Adequate Handwashing		and Food Preparation for HS	SP
☐ 11. Good Hygienic Practices	CONSUMER A		
	☐ 22. Posting	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected	Number of	Violated Provisions Re	lated
mmediately or within 10 days as determined by the Board	To Foodbo	orne Illnesses Interventi	ons
of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22):	
mmediately or within 90 days as determined by the Board of Health.		der for Correction: Base	
C N		ems checked indicate vio leral Food Code. This rep	
23. Management and Personnel (FC-2)(590,003)	by a Board	of Health member or its a	gent constitutes an
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure t	to correct violations
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspenablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006)	establishme	ent operations. If aggrieve	d by this order you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	to a hearing. Your reques	st must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)	and submitte	ed to the Board of Health	at the above address
30. Other		ys of receipt of this order. E-INSPECTION:	
S: 590InspectForm6-14.doc	2L 31 NL		
Inspector's Signature Print:	1		
NG GI	1811	MAN	
PICs Signature: Reapple Holmes Print:	Panne	Holmes	Page o Pages

Lowell Board of Health

Compliand

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 97	8-446-7103
Name Many Add and	Date	Type of Operation(s)	Type of Inspection
Address 12 Odd Odd Odd	R/sk	Food Service	Routine Re-inspection
130 Will While	Level	Residential Kitchen	Previous Inspection
Telephone 1 948 1 437 - 1662		Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint
Inspector Malal Rulling	In:	Permit No.	HACCP Other
Each violation checked requires an explanation on the narr	Out:		
1120	T Expiration Num	that a citation of specific) X
50 A V		Non	-compliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -	ServSafe Pest Contro	590.003 (A) □ 590.007 □
(Red Items) Violations marked may pose an imminent health hazard and re	aguire immediat	A - 41 Ob - 1-1	
corrective action as determined by the Board of Health.	quile illillediat	Tobacco Allergen A	590.009 (F) ☐ wareness 590.000 (G) ☐
FOOD PROTECTION MANAGEMENT	🗍 12. Preve	ention of Contamination from	ı Hands
1. PIC Assigned/Knowledgeable/Duties	🔲 13. Hand	wash Facilities	•
EMPLOYEE HEALTH	PROTECTION	I FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		oved Food or Color Additives	3
☐ 3. Personnel with Infections Restricted/Excluded		: Chemicals	
FOOD FROM APPROVED SOURCE	_		ally Namedaya Faada)
4. Food and Water from Approved Source		RATURE CONTROLS (Potentia ing Temperatures	ally nazardous roods)
5. Receiving/Condition			
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehe	_	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	_	
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		NTS FOR HIGHLY-SUSCEPTIE and Food Preparation for HS	
☐ 10. Proper Adequate Handwashing		·	56
☐ 11. Good Hygienic Practices	CONSUMER A	ng of Consumer Advisories	
		.9	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	f Violated Provisions Re orne Illnesses Intervent Factors (Red Items 1-22	ions
immediately or within 90 days as determined by the Board		r der for Correction: Base	•
of Health.		items checked indicate vi	
C N		deral Food Code. This re	
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004)	•	e Board of Health. Failure	_
24. Food and Food Frotection (FC-3)(390.004) 25. Equipment and Utensils (FC-4)(590.005)		s report may result in susp	
26. Water, Plumbing and Waste (FC-5)(590.006)		stablishment permit and c	
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrievent to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008)		tted to the Board of Healtl	
29. Special Requirements (590.009)		ays of receipt of this orde	
30. Other	DATE OF R	RE-INSPECTION:	
S: 590InspectForm6-14.doc	a)		
Inspector's Signature:	ALLIO -	- RIULI.	
PICs Signature: // / / / / / Print:	Didag	Shanlow	Page of Pages

City Hall 375 Merrimack Street

Lowell, MA

FOOD ESTABLISHMENT INSPECTION REPORT	Corner	iana		-674-4144 -446-7103
Name MANALIA Oglikani	Date	Type of Operat		Type of Inspection
Address 13 2 O To A b d 1 a a c	4/3/18 Risk	Food Servic	e	Routine Re-inspection
130 MILL DELLOY	Level	Residential	Kitchen	Previous Inspection
Telephone (978) 937-7662		Mobile		Date:
Owner	HACCP Y/N	Temporary Caterer		☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breal	kfast	General Complaint
Inspector (000) 100 PULL O	In: Out:	Permit No.		☐ HACCP ☐ Other
Each violation checked requires an explanation on the narr		nd a citation o	f specific	provision(s) violatec
Water Temp // Serve-Safe Cert Number 10 3 0 595				
Violations Related to Foodborne Illness Interventions and (Red Items)		•	Non-c ServSafe Pest Control	compliance with: 590.003 (A)
Violations marked may pose an imminent health hazard and re	equire immediate	e	Anti-Choking	g 590.009 (E) 🗆
corrective action as determined by the Board of Health.			Tobacco Allergen Awa	590.009 (F) ☐ areness 590.000 (G) ☐
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamir	_	
☐ 1. PIC Assigned/Knowledgeable/Duties		lwash Facilities		
EMPLOYEE HEALTH			0	
2. Reporting of Diseases by Food Employee and PIC		I FROM CHEMICAL oved Food or Cold		
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		n Additives	
FOOD FROM APPROVED SOURCE				
4. Food and Water from Approved Source				ly Hazardous Foods)
5. Receiving/Condition		ing Temperatures		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehe	•		
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolii	_		
PROTECTION FROM CONTAMINATION	☐ 19. Hot a	nd Cold Holding		::
☐ 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health	1 Control	
9. Food Contact Surfaces Cleaning and Sanitizing		NTS FOR HIGHLY-S and Food Prepara		E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	CONSUMER A	ADVISORY		
11. Good Hygienic Practices	🗌 22. Postir	ng of Consumer A	dvisories	
Violations Related to Good Retail Practices_ (Blue	Number	f Violated Prov	isions Pol	atod
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board		orne Illnesses I		
of Health. Non-critical (N) violations must be corrected		Factors (Red Ite		
immediately or within 90 days as determined by the Board				d on an inspection
of Health.				ations of 105 CMR ort, when signed belov
C N 23. Management and Personnel (FC-2)(590.003)				gent constitutes an
24. Food and Food Protection (FC-3)(590.004)				o correct violations
25. Equipment and Utensils (FC-4)(590.005)		i report may resi Itablishment peri		ension or revocation o
26. Water, Plumbing and Waste (FC-5)(590.006)				by this order, you
27. Physical Facility (FC-6)(590.007)	have a righ	t to a hearing. Y	our reques	st must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)				at the above address
29. Special Requirements (590.009)		ays of receipt of E-INSPECTION:	uns orger.	
S: 690InspectForm6-14-doc		2		
Inspector's Signature: All Print:	Parla.	Pallal	2.	T
Dica Signatura	fleren	-1100	<u>U</u>	Page of Pages

City Hall 375 Merrimack Street Lowell, MA

Lowell board of nearth	Compland Tel.: 978-674-4144			
FOOD ESTABLISHMENT INSPECTION REPORT			3-446-7103	
Name Muley School	Date 9 1 2 18	Type of Operation(s) ☐ Food Service	Type of Inspection Routine	
Address 130 Kind by lell	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection	
Telephone (948) 931-7462	Level	Mobile	Date:	
Owner	HACCP Y/N	│	☐ Pre-operation ☐ Suspect Illness	
Person-in-Charge (PIC)	Time	☐ Bed & Breakfast	General Complaint HACCP	
Inspector (III) led Livela	In: Out:	Permit No.	Other	
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation of specific	provision(s) violated	
Water Temp Serve-Safe Cert Number Serve-Safe Cert Number		ber <u> </u>	compliance with:	
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	ServSafe Pest Contro	590.003 (A)	
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediate	e Anti-Chokir Tobacco Allergen Av	590.009 (F) □	
FOOD PROTECTION MANAGEMENT	12. Preve	ention of Contamination from	Hands	
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	Light in wal	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	in freezen	
2. Reporting of Diseases by Food Employee and PIC	☐ 14. Approx	ved Food or Color Additives		
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potentia	lly Hazardous Foods)	
5. Receiving/Condition	☐ 16. Cooki	ng Temperatures		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating		
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolir	ng		
PROTECTION FROM CONTAMINATION	☐ 19. Hot ai	nd Cold Holding		
8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control		
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBI and Food Preparation for HS		
10. Proper Adequate Handwashing	CONSUMER A			
11. Good Hygienic Practices	∟ ZZ. Postin	g of Consumer Advisories		
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected	Number of	f Violated Provisions Re	lated	
immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected		orne Illnesses Interventi Factors (Red Items 1-22)		
immediately or within 90 days as determined by the Board		der for Correction: Base		
of Health.		tems checked indicate vio		
C N 23. Management and Personnel (FC-2)(590.003)		deral Food Code. This rep of Health member or its a		
24. Food and Food Protection (FC-3)(590,004)	order of the	Board of Health. Failure	to correct violations	
25. Equipment and Utensils (FC-4)(590.005)		report may result in susp		
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and ce ent operations. If aggrieve		
27. Physical Facility (FC-6)(590.007)		t to a hearing. Your reque		
28. Poisonous or Toxic Materials (FC-7)(590.008)	and submitt	ed to the Board of Health	at the above address	
29. Special Requirements (590.009) 30. Other	within 10 da	ays of receipt of this order	-1	
S: 590/nspec/Fam6-14.doc	DATE OF RI	E-INSPECTION:		
Ingrestave Signature Anna Company	A -	. 821	Т	
Inspector's Signature: PICs Signature: Print: Print:	Hures	+ KIVen	Page of Page	

Y			City Hall	
	CORNE	o difue		mack Street
Lowell Board of Health	action	in is	Lowell, Martin Tel.: 978-	
FOOD ESTABLISHMENT INSPECTION REPORT	Reg	weel.	Fax: 978-	
Name Money School Address 1801000000000000000000000000000000000	Date Of 11 19 Risk	Type of Opera ☐ Food Service ☐ Retail		Type of Inspection Routine Re-inspection
130 pro proces	Level	Residential		Previous Inspection
Telephone (978) 45 2-71125		│		Date: ☐ Pre-operation
Owner	HACCP Y/N	☐ Caterer	lefe at	Suspect Illness
Person-in-Charge (PIC)	Time In:	i □ Bed & Brea	Kiasi	☐ General Complaint☐ HACCP
Inspector Clubby Killian	Out:	Permit No.		Other
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation o	f specific p	provision(s) violated.
Water Temp // No Serve-Safe Cert Number 16847615	_ Expiration Num	ber	5 - 20 Non-c	シーろ compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -		ServSafe Pest Control	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat	e E	Anti-Choking Tobacco Allergen Awa	590.009 (F) 🗆
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ention of Contamii wash Facilities	nation from H	lands
EMPLOYEE HEALTH	PROTECTION	I FROM CHEMICAL	LS	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	oved Food or Cold	or Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTRO		ly Hazardous Foods)
5. Receiving/Condition	☐ 17. Rehea	ating		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir	ng		
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding		
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Healti	h Control	
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	NTS FOR HIGHLY-	SUSCEPTIBL	E-POPULATIONS (HSP)
10. Proper Adequate Handwashing		and Food Prepara	ation for HSF)
11. Good Hygienic Practices	CONSUMER A	ADVISORY ng of Consumer A	dvisories	
	22. F03ui	ig of Consumer A	dvisories	W
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	f Violated Prov orne Illnesses l Factors (Red Ite	Interventio	
immediately or within 90 days as determined by the Board				d on an inspection
of Health.				ations of 105 CMR ort, when signed below
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health mem	ber or its ag	gent constitutes an
24. Food and Food Protection (FC-3)(590.004)				o correct violations ension or revocation of
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment per		
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)				d by this order, you
28. Poisonous or Toxic Materials (FC-7)(590.008)				st must be in writing at the above address
29. Special Requirements (590.009)	within 10 da	ays of receipt of	f this order.	• • •
30. Other S: 590InspectForm6-14.doc	DATE OF R	E-INSPECTION:		9-18-19
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Inspector's Signatura: All la At Vela Printe	Jure A	KIVENA	Lat.	
Cs Signature: Print:	Diane.	Shante	Cel	Pageof Pages

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Lowell

OF

Date Verified Employee Restriction / Exclusion Emergency Suspension **Emergency Closure** 278 ō Other NO C Page: Corrective Action Required: Re-inspection Scheduled Voluntary Compliance **Board of Health** DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal Embargo 35 John Street 2nd floor Lowell, MA 01852 ٥ o σ Date: 9-* * * Childs Ba & hroson Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name: 990-035 Code Reference 590-005 Hem No. N

This Form Approved by the Department of Public Health

FORM 734B (REV. 7/2000)

compliance

City Hall 375 Merrimack Street Lowell, MA

Lowell Board of Health	Cana al	Lowell,	
FOOD ESTABLISHMENT INSPECTION REPORT	Compl		78-674-4144 78-446-7103
Name /	Date,	Type of Operation(s)	Type of Inspection
molly Ochool	10/10/19	Food Service	Routine
Address 130 nine blillet	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978 - 453 - 7725	Level	Mobile Mobile	Date:
Owner	HACCP Y/N	│	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint
Inspector 011110 6 1000	- In:	Permit No.	☐ HACCP☐ Other
Each violation checked requires an explanation on the name	Out:		
Water Temp 1100 Serve-Safe Cert Number (2847615			
		No.	n-compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	RISK Factors -	ServSafe Pest Cont	590.003 (A) rol 590.007
Violations marked may pose an imminent health hazard and re	equire immediate	Anti-Chok	king 590.009 (E)
corrective action as determined by the Board of Health.		lobacco	590.009 (F) ☐ Awareness 590.000 (G) ☐
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination fron	, ,
1. PIC Assigned/Knowledgeable/Duties	— □ 13. Handv	vash Facilities	
EMPLOYEE HEALTH	_		
 2. Reporting of Diseases by Food Employee and PIC 		FROM CHEMICALS ved Food or Color Additive	9
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potenting Temperatures	ially Hazardous Foods)
5. Receiving/Condition	☐ 10. Cookii		
☐ 6. Tags/Records/Accuracy of Ingredient Statements		•	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	1.5	
PROTECTION FROM CONTAMINATION		d Cold Holding	
8. Separation/Segregation/Protection		s a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTI and Food Preparation for H	
☐ 10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	22. Posting	g of Consumer Advisories	
Violations Related to Good Retail Practices (Blue	Normals are a f	Walstad Danielana D	alata d
Items) Critical (C) violations marked must be corrected		Violated Provisions R rne Illnesses Intervent	
immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22	
immediately or within 90 days as determined by the Board		der for Correction: Bas	
of Health.		tems checked indicate v deral Food Code. This re	
C N 23. Management and Personnel (FC-2)(590.003)		of Health member or its	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure	
25. Equipment and Utensils (FC-4)(590.005)		report may result in sus tablishment permit and o	
26. Water, Plumbing and Waste (FC-5)(590.006)		ent operations. If aggriev	
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your requ	
29. Special Requirements (590.009)		ed to the Board of Healt ays of receipt of this orde	
30. Other		E-INSPECTION:	υ. ·
S: 590InspectForm6-14.doc	А	997	
Inspector's Signature: 111011. R. Weige Print:	(Huma	L R 11010	
PICs Signature: // / / / / / / Print:	VIII.	o Should	/Page of Pages
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City Hall 375 Merrimack Street Lowell, MA

Lowell Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT	Compl	//	8-674-4144 8-446-7103			
Name 4	Date	Type of Operation(s)	Type of Inspection			
Address 350 Adams St	11/5/18 Risk	Food Service Retail	Routine Re-inspection			
Telephone St	Level	Residential Kitchen	Previous Inspection			
Owner	HACCD WAL	│	Date:			
	HACCP Y/N	Caterer Bed & Breakfast	Suspect Illness General Complaint			
Person-in-Charge (PIC) Januage Ceptosk	Time In:		HACCP			
Inspector J'mmy &	Out:	Permit No.	Other			
Each violation checked requires an explanation on the narr			provision(s) violated			
Water Temp / Serve-Safe Cert Number / 1478353 &		Non	-compliance with:			
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors	- 37/9/36 ServSafe Pest Control	590.003 (A)			
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat		ng 590.009 (E) 590.009 (F)			
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ention of Contamination from				
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC		N FROM CHEMICALS				
☐ 3. Personnel with Infections Restricted/Excluded		oved Food or Color Additives Chemicals				
FOOD FROM APPROVED SOURCE		RATURE CONTROLS (Potentia	ally Horordova Canda)			
4. Food and Water from Approved Source		king Temperatures	my nazardous roods)			
5. Receiving/Condition	17. Rehe	•				
6. Tags/Records/Accuracy of Ingredient Statements	🗌 18. Cooli	ing				
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot a	and Cold Holding				
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection		as a Public Health Control				
9. Food Contact Surfaces Cleaning and Sanitizing		NTS FOR HIGHLY-SUSCEPTIB				
☐ 10. Proper Adequate Handwashing		and Food Preparation for HS	3P			
☐ 11. Good Hygienic Practices	CONSUMER ADVISORY ☐ 22. Posting of Consumer Advisories					
Violations Related to Good Retail Practices_ (Blue						
Items) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board	To Foodbe and Risk I <i>Official Or</i>	of Violated Provisions Re orne Illnesses Interventi Factors (Red Items 1-22) Frder for Correction: Base	ions): ed on an inspection			
of Health.		items checked indicate vio deral Food Code. This rep				
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health member or its a	agent constitutes an			
24. Food and Food Protection (FC-3)(590.004)		e Board of Health. Failure s report may result in susp				
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food es	tablishment permit and co	essation of food			
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve It to a hearing. Your reque				
28. Poisonous or Toxic Materials (FC-7)(590.008)		ted to the Board of Health				
29. Special Requirements (590.009) 30. Other		ays of receipt of this order <i>E-INSPECTION</i> :	•.			
S: 590InspectForm8-14.doc	DATE OF K	E-INSPECTION;				
Inspector's Signature: Print:			Ť			
PICs Signature: Print: Print:	la Hisa	wille of the state	Page of Pages			
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City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Date 3//3 Name Type of Operation(s) Type of Inspection Food Service Routine **Address** Risk Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation HACCP Y/N Owner Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time Inn War 12 Zerokos ☐ HACCP In: Permit No. Inspector ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 142 に Serve-Safe Cert Number 2/25/12 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 **Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C. 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Inspector's Signature:

PICs Signature;

		City Hall				
	1.001	375 Merrimack Str. Lowell, MA Tel.: 978-674-4144 Fax: 978-446-7103				
Lowell Board of Health	Correct	Lowell, N				
FOOD ESTABLISHMENT INSPECTION REPORT	Lition 1	Fax: 978	3-674-4144 3-446-7103			
Name Multiland School	Date 10/9/19	Type of Operation(s) Food Service	Type of Inspection Routine			
Address a i / / di	Risk	Retail	Re-inspection			
Telephone 350 Adams St	Level	Residential Kitchen	Previous Inspection			
		│	Date: Pre-operation			
Owner	HACCP Y/N	☐ Caterer	Suspect Illness			
Person-in-Charge (PIC) Jun Mark Zunk OSK	Time In:	↑ ☐ Bed & Breakfast	General Complaint HACCP			
Inspector Jim myle	Out:	Permit No.	Other			
Each violation checked requires an explanation on the na	rrative page(s) a	nd a citation of specific	provision(s) violated			
Water Temp 120' Serve-Safe Cert Number 177835-3	Expiration Num	ober 2/35/22 Non-	compliance with:			
Violations Related to Foodborne Illness Interventions and	d Risk Factors -	ServSafe	590.003 (A)			
(Red Items)		Pest Control Anti-Chokin	590.007			
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediate	Tobacco Allergen Aw	590.009 (F) 🗆			
FOOD PROTECTION MANAGEMENT	☐ 12 Preve	ntion of Contamination from I				
☐ 1. PIC Assigned/Knowledgeable/Duties		vash Facilities	lands			
EMPLOYEE HEALTH	_					
Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS				
☐ 3. Personnel with Infections Restricted/Excluded	_	ved Food or Color Additives				
FOOD FROM APPROVED SOURCE	15. Toxic	Chemicals				
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potential	lly Hazardous Foods)			
5. Receiving/Condition	☐ 16. Cookir	ng Temperatures				
6. Tags/Records/Accuracy of Ingredient Statements	🗌 17. Rehea	ting				
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	g				
PROTECTION FROM CONTAMINATION	🔲 19. Hot an	d Cold Holding				
8. Separation/Segregation/Protection	☐ 20. Time a	s a Public Health Control				
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	, , , , , , , , , , , , , , , , , , , ,			
10. Proper Adequate Handwashing	CONSUMER A					
11. Good Hygienic Practices		g of Consumer Advisories				
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f Health. Non-critical (N) violations must be corrected mmediately or within 90 days as determined by the Board		der for Correction: Based	d on an inspection			
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CN		eral Food Code. This repo	•			
23. Management and Personnel (FC-2)(590.003)		of Health member or its ag Board of Health. Failure t				
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe				
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food est	ablishment permit and ce	ssation of food			
27. Physical Facility (FC-6)(590.007)		nt operations. If aggrieved				
28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your requesed to the Board of Health				
29. Special Requirements (590.009)		ys of receipt of this order.				
30. Other	DATE OF RE	-INSPECTION:				
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Committee Speak	MINIMUM	CEPILOSTY				

PICs Signature: Win Mary Sinkok,

THE COMMONWEALTH OF MASSACHUSETTS

City OF Lowell

35 John Street 2nd floor Lowell, MA 01852 Board of Health

Strablishment Name: Vn/ Elanch Street 2nd floor Lowell, MA 01852 Board of Health

Date: 10/9/19 Page 1 Date: 10/9/19 Page:

	T			Disci											くた	No.	
				ussion With											7-5-1	Code Reference	
				Discussion With Person in Charge:			śta							7	0	C - Critical Item R - Red Item	
														Damages Chywall in stable	1 -1 11 . 1	DESCRIPTION OF VIOLATION / I	Dale.
Voluntary Disposal	☐ Embargo	☐ Re-inspection Scheduled	Voluntary Compliance	Corrective Action Required:	×	×								C) free	V	PLAN OF CORRECTION	11/10/10
	0			ıired: □ No						- 1				La Kis	"//		rage:
Other	Emergency Closure	Emergency Suspension	Employee Restriction /														100
	ure	bension	iction /	es												Date	1

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date U Type of Operation(s) Type of Inspection Food Service **∦**Routine Address Retail Re-inspection Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 120 Serve-Safe Cert Number 14783538 Expiration Number 2/05 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [(Red Items) 590.007 **Pest Control** Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC. ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP. ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below \mathbf{C} 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order.

Inspector's Signature:

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PiCs Signature: Aum Mau Septos 4 Print: Inn Man (Zeptos 4 Page of Pages)

DATE OF RE-INSPECTION:

30. Other

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375 Merrimack Street Lowell, MA Lowell Board of Health Cumplied Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Date 3/22/18 Type of Operation(s) Type of Inspection Name lanorial Food Service **Routine** Retail ☐ Re-inspection **Address** Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Pre-operation Temporary HACCP Y/N Owner Suspect Illness Caterer ☐ Bed & Breakfast **General Complaint** Person-in-Charge (PIC) Time ☐ HACCP In: ☐ Other Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 155/1005 Expiration Number 8/08/02 Water Temp 1200 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 **Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) **FOOD PROTECTION MANAGEMENT** 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590inspectForm6-14.doc

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Inspector's Signature:

PICs Signature:

City Hall

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Type of Operation(s) Type of Inspection Name Date Food Service Routine Retail Re-inspection **Address** Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness Person-in-Charge (PIC) Maria Bed & Breakfast General Complaint Time HACCP In: Other Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 122 6 Serve-Safe Cert Number 155/9228 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [**Pest Control** 590.007 (Red Items) Anti-Choking 590.009 (E) Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices ☐ 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: **Print:** PICs Signature Page_ **Print:** of Pages

Lowell Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT

City Hall

Lowell, MA

375 Merrimack Street

Tel.: 978-674-4144

Fax: 978-446-7103

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	omplie	City Hall					
Lowell Board of Health	1 cm-chu	Lowell, N	rimack Street //A				
Lowell Board of Health	1. hon h	red Tel.: 978	3-674-4144				
FOOD ESTABLISHMENT INSPECTION REPORT	Date	Fax: 978	3-446-7103				
Parw to Cket Memorial School	4/24//9	Type of operation(3)	Type of Inspection Boutine				
Address 425 W Meadow Rd	Risk	Retail Residential Kitchen	Re-inspection Previous Inspection				
Telephone	Level	Mobile	Date:				
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness				
Person-in-Charge (PIC) Marion folyges	Time	Bed & Breakfast	General Complaint				
Inspector	In: Out:	Permit No.	HACCP Other				
Each violation checked requires an explanation on the narra		nd a citation of specific	provision(s) violated.				
Water Temp Serve-Safe Cert Number		ber					
Violations Related to Foodborne Illness Interventions and	Risk Factors -	Non-e ServSafe	compliance with: 590.003 (A) □				
(Red Items)		Pest Control	590.007 □				
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F) □				
FOOD PROTECTION MANAGEMENT	12. Prever	ntion of Contamination from I	• •				
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handw	vash Facilities					
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS					
2. Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives					
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic (Chemicals	an and an analysis of the second				
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)				
5. Receiving/Condition	☐ 16. Cookin	ng Temperatures	•				
1. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ting					
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Cooling						
PROTECTION FROM CONTAMINATION	☐ 19. Hot and Cold Holding						
8. Separation/Segregation/Protection	20. Time as a Public Health Control						
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP)						
☐ 10. Proper Adequate Handwashing		and Food Preparation for HSF					
11. Good Hygienic Practices	CONSUMER ADVISORY ☐ 22. Posting of Consumer Advisories						
iolations Related to Good Retail Practices_ (Blue							
ems) Critical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board	To Foodbo	Violated Provisions Rela rne Illnesses Interventio actors (Red Items 1-22):					
f Health. Non-critical (N) violations must be corrected nmediately or within 90 days as determined by the Board		der for Correction: Based	on an inspection				
f Health.	today, the it	ems checked indicate viol	lations of 105 CMR				
C N 23. Management and Personnel (FC-2)(590.003)		leral Food Code. This repo of Health member or its ag					
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. Failure t	o correct violations				
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe					
26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ces ent operations. If aggrieved					
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	to a hearing. Your reques	st must be in writing				
29. Special Requirements (590.009)		ed to the Board of Health ys of receipt of this order.					
30. Other		E-INSPECTION:					
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Inspector's Signature: Print:):m	my le					
PICs Signature: Print:	Vacia	Poly TOS	Pageof Pages				
- Mary V	-1414	1019 (0)					

THE COMMONWEALTH OF MASSACHUSETTS

OF Lowell

7 No. Discussion With Person in Charge: Establishment Name: Leaks Code Reference R-6 Re-C Pandon C - Critical Item
R - Red Item through Evdura 35 John Street 2nd floor Lowell, MA 01852 Board of Health Chemites Memorial School 0 DESCRIPTION OF VIOLATION / PLAN OF CORRECTION lonk about PLEASE PRINT CLEARLY _ Date: 4/24/15 Party Schedule Voluntary Compliance ☐ Embargo ☐ Re-inspection Scheduled Voluntary Disposal Corrective Action Required: Jefin! 6 Source of Page: berning □ No Employee Restriction / Exclusion Emergency Suspension Emergency Closure of **☑**Yes Date Verified

Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT	0	onflial	Lowell, Tel.: 97	rrimack Street	
Name Puntacket Mansie / Address 925 W. Mender Rd Telephone Owner		Date G//G//S Risk Level	Type of Operation(s) Food Service Retail Residential Kitchen Mobile Temporary Caterer	Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation Suspect Illness	
Person-in-Charge (PIC) Maria Polyzos Inspector Limmy L.		Time In: Out:	☐ Bed & Breakfast Permit No.	General Complaint HACCP Other	
Each violation checked requires an explanation on the	ne narra	tive page(s) a	nd a citation of specific	provision(s) violated	
Water Temp 1000 Serve-Safe Cert Number 15576		Expiration Num		provincion(o), violatou	
Violations Related to Foodborne Illness Intervention (Red Items)	ns and F	Risk Factors -	12/6/2) Non ServSafe Pest Contro		
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	and req	uire immediate	Tobacco Allergen A	590.009 (F)	
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties			ntion of Contamination from vash Facilities	ı Hands	
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		_	FROM CHEMICALS ved Food or Color Additives	S	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source 5. Receiving/Condition		TIME/TEMPER	ally Hazardous Foods)		
 ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 7. Conformance with Approved Procedures/HACCP Plans 	3	☐ 17. Rehea	-		
PROTECTION FROM CONTAMINATION	,		nd Cold Holding		
 ■ 8. Separation/Segregation/Protection ■ 9. Food Contact Surfaces Cleaning and Sanitizing 		REQUIREMEN	TS FOR HIGHLY-SUSCEPTIE and Food Preparation for H	` '	
☐ 10. Proper Adequate Handwashing☐ 11. Good Hygienic Practices		CONSUMER A 22. Posting	DVISORY g of Consumer Advisories		
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected		To Foodbo and Risk F	,	ions):	
mmediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc		and Risk Factors (Red Items 1-22): Official Order for Correction: Based on an inspectoday, the items checked indicate violations of 10:590.000/federal Food Code. This report, when sign by a Board of Health member or its agent constitution order of the Board of Health. Failure to correct violated in this report may result in suspension or reverse the food establishment permit and cessation of for establishment operations. If aggrieved by this order have a right to a hearing. Your request must be in and submitted to the Board of Health at the above within 10 days of receipt of this order. DATE OF RE-INSPECTION:			
	Print:	Macin	WIP I C	Page of Pages	

City Hall

			imack Street
Lowell Board of Health	, ,	Lowell, M	1A 3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Compli	Fax: 978	3-446-7103
Name o 1	Date	Type of Operation(s)	Type of Inspection
Reilly School		Food Service	Routine
Address 115 Drug as Rd.	Rísk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978-937-7653	Level	Mobile	Date:
Owner	HACCP Y/N	│	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (PIC) Russian Dock / /	Time	Bed & Breakfast	General Complaint
LOWING POTCE	In:	Doumit No.	☐ HACCP ☐ Other
Inspector LISH SAM	Out:	Permit No.	
Each violation checked requires an explanation on the narr			provision(s) violated
Water Temp Serve-Safe Cert Number 11865058	Expiration Num	nber 12/18/19 Non-c	compliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -	ServSafe	590.003 (A)
(Red Items)		Pest Control Anti-Chokin	
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediati	e Tobacco	590.009 (F)
·	—	Allergen Aw	, ,
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties	∐ 12. Preve	ention of Contamination from	Hands
1. The Assigned/Milowledgeable/Edities	🗌 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMPER	RATURE CONTROLS (Potential	lly Hazardous Foods)
4. Food and Water from Approved Source		ing Temperatures	, , , , , , , , , , , , , , , , , , , ,
5. Receiving/Condition	☐ 17. Rehe	•	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir	•	
☐ 7. Conformance with Approved Procedures/HACCP Plans		_	
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/Segregation/Protection		as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HS	, ,
☐ 10. Proper Adequate Handwashing	CONSUMER A	ADVISORY	
☐ 11. Good Hygienic Practices	22. Postir	ng of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue		00.44 (D. 11. D.)	
Items) Critical (C) violations marked must be corrected		f Violated Provisions Re orne Illnesses Interventic	
immediately or within 10 days as determined by the Board		Factors (Red Items 1-22):	
of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health.	• •	tems checked indicate vio	
CN		deral Food Code. This rep of Health member or its a	
23. Management and Personnel (FC-2)(590.003)		e Board of Health. Failure	
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)		report may result in susp	
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and ce	
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve t to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008)		ted to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this order	
30. Other	DATE OF R	E-INSPECTION:	
S: 590InspectForm6-14.doc			
Inspector's Signature: Print:	1150 9	Sam	
PICs Signature: Print:	Ricalair	2/1/1	Page Pages
- Jarryan Jayar I	NUMPIK	147U	

City Hall 375 Merrimack Street

Lowell Board of Health		Lowell, N	
FOOD ESTABLISHMENT INSPECTION REPORT	Comple	Tel.: 978	3-674-4144 3-446-7103
Name Q . 11 C /	Date	Type of Operation(s)	Type of Inspection
Address 115 D	9/10/18	Food Service	Re-inspection
115 touglas ka.	Risk /	Residential Kitchen	Previous Inspection
Telephone 978 - 937 - 7685		☐ Mobile☐ Temporary	Date: Pre-operation
Owner	HACCP Y/N	Caterer	Suspect Illness
Person-in-Charge (PIC)	Time	Bed & Breakfast	General Complaint HACCP
Inspector LISA SAM	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the na			provision(s) violated
Water Temp 355 Serve-Safe Cert Number 118650	58 Expiration Num	nber D/8/19	497 900
Violations Related to Foodborne Illness Interventions at (Red Items)		ServSafe Pest Contro	
Violations marked may pose an imminent health hazard and corrective action as determined by the Board of Health.	require immediate	e Anti-Chokir Tobacco Allergen Av	590.009 (F)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	☐ 14. Appro	oved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMPEF	RATURE CONTROLS (Potentia	Illy Hazardous Foods)
4. Food and Water from Approved Source		ng Temperatures	,
5. Receiving/Condition	☐ 17. Rehea	ating	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolir	ng	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection		as a Public Health Control	
	REQUIREMEN	ITS FOR HIGHLY-SUSCEPTIB	LE-POPULATIONS (HSP)
9. Food Contact Surfaces Cleaning and Sanitizing	☐ 21. Food	and Food Preparation for HS	SP.
10. Proper Adequate Handwashing	CONSUMER A		
11. Good Hygienic Practices	∐ 22. Postin	ng of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items). Critical (C) violations marked must be corrected	Number of	f Violated Provisions Re	lated
immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	and Risk F	orne Illnesses Interventi Factors (Red Items 1-22)	
immediately or within 90 days as determined by the Board		der for Correction: Base tems checked indicate vic	
of Health.		deral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health member or its a	igent constitutes an
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure report may result in susp	
25. Equipment and Utensils (FC-4)(590.005)		tablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)	establishme	ent operations. If aggrieve	ed by this order, you
28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your reque ted to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this order	
30. Other		E-INSPECTION:	
S: 590InspectForm6-14,doc			5)
Inspector's Signature: Prin	1: LISA . S.	om	1
PICs Signature: BMare Hutell Prin	ti POIINLE	Arr(Page of Pages
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City Hall 375 Merrimack Street Lowell, MA

Lowell Board	Of h	lealth
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LOWEII DOGIU OI HEGILII	0	1 - 1	8-674-4144			
FOOD ESTABLISHMENT INSPECTION REPORT	Comp		8-446-7103			
Name Reilly School	Date 3/14/19	Type of Operation(s)	Type of Inspection Routine			
Address 115 Bouglas Rd.	Risk	Retail Residential Kitchen	Re-inspection Previous Inspection			
Telephone978 - 987 - 7685	Level	Mobile	Date:			
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness			
Person-in-Charge (PIC) Bunnie Hotel	Time In:					
Inspector LISA SAM	Out:	Permit No.	Other			
Each violation checked requires an explanation on the narra	ative page(s) a	ind a citation of specific	provision(s) violated			
Water Temp Serve-Safe Cert Number		nber <u>12/18/1</u> 9	compliance with:			
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	ServSafe Pest Contro	590.003 (A)			
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	quire immediate	e Anti-Chokir Tobacco Allergen Av	ng 590.009 (E) □ 590.009 (F) □			
FOOD PROTECTION MANAGEMENT ☐ 1. PIC Assigned/Knowledgeable/Duties	_	ention of Contamination from wash Facilities	Hands			
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS Eved Food or Color Additives				
3. Personnel with Infections Restricted/Excluded	15. Toxic					
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	illy Hazardous Foods)			
☐ 5. Receiving/Condition		ng Temperatures				
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea					
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolin	_				
PROTECTION FROM CONTAMINATION		nd Cold Holding				
8. Separation/Segregation/Protection		as a Public Health Control	. = ====			
□ 9. Food Contact Surfaces Cleaning and Sanitizing□ 10. Proper Adequate Handwashing	REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 21. Food and Food Preparation for HSP					
11. Good Hygienic Practices	CONSUMER ADVISORY 22. Posting of Consumer Advisories					
/iolations Related to Good Retail Practices_ (Blue						
tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	Violated Provisions Re orne Illnesses Interventic actors (Red Items 1-22)	ons			
mmediately or within 90 days as determined by the Board		der for Correction: Base				
of Health.		tems checked indicate vio deral Food Code. This rep				
23. Management and Personnel (FC-2)(590.003)		of Health member or its a				
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure				
25. Equipment and Utensils (FC-4)(590.005)		report may result in susp tablishment permit and ce				
26. Water, Plumbing and Waste (FC-5)(590.006)		ent operations. If aggrieve				
27. Physical Facility (FC-6)(590.007)		to a hearing. Your reque				
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ed to the Board of Health				
29. Special Requirements (590.009) 30. Other		ays of receipt of this order E -INSPECTION :				
S: 590InspectForm6-14.doc						
Inspector's Signature: Print:	LIBA 5	am				
PICs Signature: Print:	12000	2-111	Page / of / Pages			

City Hall 375 Merrimack Street Lowell MA

Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name de of Operation(s) Type of Inspection Food Service **Z** Routine **Address** Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. __ Serve-Safe Cert Number _______ Expiration Number __ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC. ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: PICs Signature: **Pages Print:**

Lowell Board of Health	0 4		Lowell, N	rimack Street		
FOOD ESTABLISHMENT INSPECTION REPORT	Complia	Type of Operati	Fax: 978	3-446-7103		
Address 72 1126 School	Date Doll8	Type of Inspection ☐ Routine ☐ Re-inspection				
Telephone 926 163	Level	Residential h	Citchen	Previous Inspection Date:		
Owner	HACCP Y/N	☐ Temporary ☐ Caterer		☐ Pre-operation☐ Suspect Illness		
Person-in-Charge (PIC) DONNA J. VERGADOS	Time	Bed & Break	fast	General Complaint		
Inspector / ISA SAM	In: Out:	Permit No.		HACCP Other		
Each violation checked requires an explanation on the narra		nd a citation of	specific	provision(s) violated.		
Water Temp Serve-Safe Cert Number	xpiration Num	ber				
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	i	ServSafe Pest Control			
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	7	Anti-Chokin Tobacco Allergen Aw	590.009 (F) □		
FOOD PROTECTION MANAGEMENT ☐ 1. PIC Assigned/Knowledgeable/Duties	_	ention of Contamin wash Facilities	ation from	Hands		
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS oved Food or Colo Chemicals		i		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 16. Cooking Temperatures					
5. Receiving/Condition	17. Rehe	ating				
6. Tags/Records/Accuracy of Ingredient Statements7. Conformance with Approved Procedures/HACCP Plans	18. Cooling					
PROTECTION FROM CONTAMINATION	☐ 19. Hot and Cold Holding					
8. Separation/Segregation/Protection	20. Time	☐ 20. Time as a Public Health Control				
☐ 9. Food Contact Surfaces Cleaning and Sanitizing☐ 10. Proper Adequate Handwashing	REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) ☐ 21. Food and Food Preparation for HSP					
☐ 11. Good Hygienic Practices	CONSUMER A	DVISORY ng of Consumer Ad	dvisories			
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo	f Violated Provi orne Illnesses I Factors (Red Ite	nterventi	ions		
immediately or within 90 days as determined by the Board of Health.	today, the it 590.000/fed	ems checked in leral Food Code	dicate vio . This rep	d on an inspection plations of 105 CMR port, when signed below		
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)	order of the	Board of Health	n. Failure t	igent constitutes an to correct violations ension or revocation of		
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)	establishme have a right	t to a hearing. Yo	f aggrieve our reque	ed by this order, you est must be in writing		
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	within 10 da	ed to the Board ays of receipt of E-INSPECTION:		at the above address		
S: 590InspectForm6-14.doc		40				
Inspector's Signature: PICs Signature: Print:	E150 2	om		Page / of Pages		

City Hall 375 Merrimack Street

Lowell, MA	
Tel · 978-674-4144	

Lowell Board of Health		Lowell,	IVIA 18-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Coms	, ,,	'8-446-7103
Name Riverside Schuzl	9/19/18	Type of Operation(s) Food Service	Type of Inspection
Address 73 Wobum St.	Risk /	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone 978-453-115	Level	Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation☐ Suspect Illness
Person-in-Charge (PIC) DONNA J-Vergados	Time	Bed & Breakfast	General Complaint HACCP
Inspector LISA SAM	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the narra	V.	nd a citation of specific	provision(s) violated.
Water Temp Serve-Safe Cert Number	3 Expiration Num	nber 1/30/21	n-compliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -	ServSafe	590.003 (A) 🗆
(Red Items)		Pest Contro Anti-Choki	
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	Tobacco	590.009 (F) □
		Allergen A	SP- (- / -
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties	12. Preve	ntion of Contamination from	Hands
1. FIC Assigned/Knowledgeable/Duties	☐ 13. Handv	vash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	ved Food or Color Additives	3
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			
4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	ally Hazardous Foods)
5. Receiving/Condition	_	ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	-	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	9	
PROTECTION FROM CONTAMINATION	☐ 19. Hot and Cold Holding		
8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIE and Food Preparation for HS	, ,
☐ 10. Proper Adequate Handwashing	CONSUMER A	DVISORY	
☐ 11. Good Hygienic Practices	22. Posting	g of Consumer Advisories	9
Violations Related to Good Retail Practices_ (Blue			
Items) Critical (C) violations marked must be corrected		Violated Provisions Re	
immediately or within 10 days as determined by the Board		rne Illnesses Interventi actors (Red Items 1-22)	
of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health.		ems checked indicate vid	
CN		leral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)		of Health member or its a	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure report may result in susp	
25. Equipment and Utensils (FC-4)(590.005)		ablishment permit and co	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)	establishme	ent operations. If aggrieve	ed by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your reque	
29. Special Requirements (590.009)		ed to the Board of Health lys of receipt of this ordel	
30. Other		iys of receipt of this order E-INSPECTION:	•
S: 590InspectForm6-14,doc		5V=4	
Inspector's Signature	,		
Inspector's Signature Print:	-1879 DA	m	_ , , _
PICs Signature: Print	AINA T.	Verendas	Page of Pages

City Hall

375 Merrimack Stree
Lowell, MA

Lowell Board of Health		Lowell, N	11A 3-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT	Com		-446-7103
Name Riverside School	3/27/19	Type of Operation(s) 1 Food Service	Type of Inspection Line
Address 73 Whurn St.	Risk"	Retail	Re-inspection
Telephone ADD - 11/5 2 11/5	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person-in-Charge (PIC) Nancy Fisette	Time	│ □ Bed & Breakfast	☐ General Complaint ☐ HACCP
Inspector / 15A SAM	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the narr		nd a citation of specific	provision(s) violate
Water Temp Serve-Safe Cert Number 1318 855	Expiration Num	ber 1300	compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)		ServSafe Pest Control	590.003 (A) 590.007
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F) □
FOOD PROTECTION MANAGEMENT ☐ 1. PIC Assigned/Knowledgeable/Duties	_	ention of Contamination from	Hands
	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC	14. Appro	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	,
-	☐ 17. Rehea	ating	
6. Tags/Records/Accuracy of Ingredient Statements	18. Coolin	ng	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot and Cold Holding		
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection	20. Time as a Public Health Control		
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	
☐ 10. Proper Adequate Handwashing	CONSUMER A	_	ur
11. Good Hygienic Practices		g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue	Number of	Violated Provisions Rel	ated
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board	To Foodbo	orne Illnesses Interventio	ons
of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22):	
immediately or within 90 days as determined by the Board of Health.		der for Correction: Based ems checked indicate viol	
CN		leral Food Code. This repo	
23. Management and Personnel (FC-2)(590.003)		of Health member or its a	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure to	
25. Equipment and Utensils (FC-4)(590.005)		report may result in susper ablishment permit and ces	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieved	
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	to a hearing. Your reques	st must be in writing
29. Special Requirements (590.009)		ed to the Board of Health	
30. Other		ys of receipt of this order. E-INSPECTION:	
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City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name e of Operation(s) Type of Inspection Food Service Routine Re-inspection **Address** Retail Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of/specific provision(s) violated. Water Temp 1200 Serve-Safe Cert Number 8189573 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) 🗆 (Red Items) 590.007 **Pest Control Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.do Inspector's Signature: **Print:**

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PICs Signature:

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection obin son 28/18 Food Service **Routine Address** Retail Re-inspection Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness General Complaint ☐ Bed & Breakfast Person-in-Charge (PIC) Time HACCP In: Other Inspector Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 1551901 Expiration Number 8/08/22 Water Temp __ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) (Red Items) Pest Control 590.007 **Anti-Choking** 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590,008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Inspector's Signatures

PICs Signature:

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Lowell Board of Health

Complied

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fax: 978	-446-7103
Name Robinson Salvost.	Date / 0/26/18	Type of Operation(s) Food Service	Type of Inspection
Address 110 Jane 32	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCD VAL	Temporary	☐ Pre-operation
	HACCP Y/N	Caterer	☐ Suspect Illness
Person-in-Charge (PIC) DEVISE RIST	Time In:	Bed & Breakfast	☐ General Complaint☐ HACCP
Inspector // // / le	Out:	Permit No.	Other
Each violation checked requires an explanation on the	narrative page(s) a	ind a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number 55193	21_ Expiration Num	nber 3/38/22	5
Violations Related to Foodborne Illness Interventions	and Risk Factors -	ServSafe	compliance with: 590.003 (A)
(Red Items)		Pest Control	590.007 □
Violations marked may pose an imminent health hazard an corrective action as determined by the Board of Health.	nd require immediate	e Anti-Chokin Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination from H	lands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Handv	vash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
2. Reporting of Diseases by Food Employee and PIC		ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic (
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	TIME/TEMPEF	RATURE CONTROLS (Potential	ly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	,
6. Tags/Records/Accuracy of Ingredient Statements	🗌 17. Rehea	ting	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Cooling	g	
	☐ 19. Hot an	d Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time a	s a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	ITS FOR HIGHLY-SUSCEPTIBL	E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	21. Food a	and Food Preparation for HSP	e:
11. Good Hygienic Practices	CONSUMER A		
	∐ 22. Posting	g of Consumer Advisories	
/iolations Related to Good Retail Practices (Blue	Number of	Violated Provisions Rela	ited
tems) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board		rne Illnesses Intervention	
of Health. Non-critical (N) violations must be corrected		actors (Red Items 1-22):	
mmediately or within 90 days as determined by the Board of Health.		der for Correction: Based	
C N		tems checked indicate viol deral Food Code. This repo	
23. Management and Personnel (FC-2)(590.003)		of Health member or its ag	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure to	
25. Equipment and Utensils (FC-4)(590.005)		report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and ces ent operations. If aggrieved	
27. Physical Facility (FC-6)(590.007)	have a right	to a hearing. Your reques	t must be in writing
28. Poisonous or Toxic Materials (FC-7)(590,008) 29. Special Requirements (590,009)	and submitt	ed to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this order.	
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City Hall 375 Merrimack Street Lowell, MA **Lowell Board of Health** Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Type of Operation(s) Name Type of Inspection Food Service ☐ Boutine Re-inspection Retail **Address** Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation HACCP Y/N Owner ☐ Suspect Illness Caterer Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP ln: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 15779270 Expiration Number 8788/9922 Water Temp 1200 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-ServSafe 590.003 (A) (Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) [**FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH PROTECTION FROM CHEMICALS** ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

Inspector's Signature:

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*		City Hall 375 Mer	rimack Street
Lowell Board of Health	mestere.	Lowell, N	MA
FOOD ESTABLISHMENT INSPECTION REPORT	ion peedle	Tel.: 978	8-674-4144 8-446-7103
Name Lobinson School	Date 9/19/19	Type of Operation(s) Food Service	Type of Inspection Routine
Address 110 June 51	Risk	Retail	Re-inspection
Telephone	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner	HACCP Y/N	Temporary Caterer	Pre-operation
Person-in-Charge (PIC) Devise Rush	Time	Bed & Breakfast	Suspect Illness General Complaint
Inspector June 1	In: Out:	Permit No.	│
Each violation checked requires an explanation on the narra			
Water Temp 1プロ Serve-Safe Cert Number 15プラ3コ	Expiration Num	ber 805/22	provision(s) violated.
Violations Related to Foodborne Illness Interventions and		8/14/20 Non- ServSafe	compliance with:
(Red Items) Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	Pest Contro Anti-Chokir Tobacco	
•		Allergen Av	, ,
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from	Hands
EMPLOYEE HEALTH	_	vash Facilities	
Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS	
☐ 3. Personnel with Infections Restricted/Excluded	☐ 14. Approx	ved Food or Color Additives	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source	_	ATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cookin	ng Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	🗌 17. Rehea	ting	
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Cooling	g	
PROTECTION FROM CONTAMINATION	☐ 19. Hot and	d Cold Holding	
8. Separation/Segregation/Protection	20. Time a	s a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY-SUSCEPTIBLE Ind Food Preparation for HSI	• • • • • • • • • • • • • • • • • • • •
☐ 10. Proper Adequate Handwashing	CONSUMER A	· .	
11. Good Hygienic Practices		of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board	Number of	Violated Provisions Rel rne Illnesses Interventio	
of Health. Non-critical (N) violations must be corrected	and Risk Fa	actors (Red Items 1-22):	ll
immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health.		ems checked indicate vio eral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)	by a Board o	of Health member or its a	gent constitutes an
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure t report may result in suspe	
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)		ablishment permit and ce	
26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007)		nt operations. If aggrieve	
28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your requesed to the Board of Health	
29. Special Requirements (590,009)	within 10 day	ys of receipt of this order.	
S: 590/inspactForm6-14.doc	DATE OF RE	-INSPECTION:	
Ingractav's Signatures	—— <i>]</i> .	-/	1
Inspector's Signature: PICs Signature: Print:	J'mmy	, le	Page 1 of 2n
PICs Signature: Print:	Donnes	Rush	Page ofPages

THE COMMONWEALTH OF MASSACHUSETTS

City

Date Verified Emergency Suspension Employee Restriction / Exclusion Emergency Closure E Yes Other % [] σ O ٥ Corrective Action Required: Re-inspection Scheduled Voluntary Compliance 35 John Street 2nd floor Lowell, MA 01852 Board of Health DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal Embargo 01/6/16 ٥ ╛ O PLEASE PRINT CLEARLY Date: 641 Su É Robinson School Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name: FORM 734B (REV. 7/2000) Code Reference Fee No.

City Hall 375 Merrimack Street Lowell, MA **Lowell Board of Health** Compliant Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Inspection pe of Operation(s) Food Service Routine Retail Re-inspection **Address** Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness Bed & Breakfast General Complaint Person-in-Charge (PIC) Time HACCP In: Inspector ☐ Other Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. _ Serve-Safe Cert Number 13388 484 Expiration Number 03 36 3 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below N C by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590,003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other **DATE OF RE-INSPECTION:**

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PICs Signature:

Inspector's Signature:

Lowell Board of Health

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	00.17	×(,	Fax: 978-	446-7103
Name Rogers School Address 42 14 6/4 and S	Date 9/20/18 Risk	Type of Operation Type of Oper	e	Type of Inspection Routine Re-inspection
Telephone and I may 2002	Level	Residential k		Previous Inspection Date:
0wner	HACCP Y/N	Temporary		☐ Pre-operation
Person-in-Charge (PIC)	Time	│	fast	Suspect Illness General Complaint
Inspector / 54 Sam	In:	Permit No.		☐ HACCP ☐ Other
Each violation checked requires an explanation on the narry	Out:		enecific n	
Water Temp 12-0° Serve-Safe Cert Number 13388 484			2/	ompliance with:
Violations Related to Foodborne Illness Interventions and	Risk Factors -		ServSafe	590.003 (A)
(Red Items) Violations marked may pose an imminent health hazard and re	auire immediate		Pest Control Anti-Choking	. , ,
corrective action as determined by the Board of Health.	qui o irrinodidi.		Tobacco Allergen Awa	590.009 (F) areness 590.000 (G)
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamina	-	` ,
1. PIC Assigned/Knowledgeable/Duties	_	wash Facilities		
EMPLOYEE HEALTH		FROM CHEMICALS	s	
☐ 2. Reporting of Diseases by Food Employee and PIC		ved Food or Color		
☐ 3. Personnel with Infections Restricted/Excluded	15. Toxic €			
FOOD FROM APPROVED SOURCE	TIME/TEMPER	ATURE CONTROL	S (Potentiall	y Hazardous Foods)
4. Food and Water from Approved Source		ng Temperatures		,,
5. Receiving/Condition	☐ 17. Rehea	iting		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	g		
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding		
PROTECTION FROM CONTAMINATION ☐ 8. Separation/Segregation/Protection		as a Public Health	Control	
9. Food Contact Surfaces Cleaning and Sanitizing				E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing	☐ 21. Food a	and Food Preparat	ion for HSP	
11. Good Hygienic Practices	CONSUMER A	DVISORY g of Consumer Ad	luicarias	
	22. F0\$(iii)	g of Consumer Ad	VISURIES	
Violations Related to Good Retail Practices_ (Blue tems) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	To Foodbo and Risk F	Violated Provisorne Illnesses In actors (Red Iter	nterventior ms 1-22):	ns
immediately or within 90 days as determined by the Board of Health.				on an inspection ations of 105 CMR
C N	590.000/fed	deral Food Code	. This repo	rt, when signed belov
23. Management and Personnel (FC-2)(590.003)				ent constitutes an
24. Food and Food Protection (FC-3)(590.004)				o correct violations nsion or revocation of
25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006)	the food est	tablishment pern	nit and ces	sation of food
27. Physical Facility (FC-6)(590.007)				by this order, you the thing the thi
28. Poisonous or Toxic Materials (FC-7)(590.008)				at the above address
29. Special Requirements (590.009)		ays of receipt of t	this order.	
S: 590/inspec(Form6-14.doc	DATE OF RE	E-INSPECTION:		
Increater's Secretary	7			
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City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 some lies FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service Routine **Address** Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer Suspect Illness General Complaint Bed & Breakfast Person-in-Charge (PIC) Time HACCP In: Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 388484 Expiration Number 306 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 **FOOD PROTECTION MANAGEMENT** ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH PROTECTION FROM CHEMICALS** 2. Reporting of Diseases by Food Employee and PIC 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an 24. Food and Food Protection order of the Board of Health. Failure to correct violations (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address Special Requirements (590.009)

Inspector's Signature Print: PICs Signature Print: Page ___ of __ Pages

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within 10 days of receipt of this order.

DATE OF RE-INSPECTION:

375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name of-Operation(s) Type of Inspection Food Service Routine Retail Re-inspection **Address** Risk Residential Kitchen Level Previous Inspection Telephone Mobile Date: ☐ Pre-operation Temporary HACCP Y/N Owner Caterer ☐ Suspect Illness Bed & Breakfast General Complaint Time Person-in-Charge (PIC HACCP ln: Permit No. Other Inspector Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp _/20° __ Serve-Safe Cert Number 13388 484 Expiration Number _ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 590.009 (E) 🗆 **Anti-Choking** Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below C N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Inspector's Signature:

PICs Signature

City Hall

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City Hall 375 Merrimack Street

Lowell, MA

Lowell Board of Health

FOOD ESTABLISHMENT INSPECTION REPORT	Compli	Tel.: 97 Fax: 97	'8-674-4144 '8-446-7103
Name Shaughnessy School	Date	Type of Operation(s)	Type of Inspection
Address // S S S S S S S S S S S S S S S S S	Risk	Food Service Retail	Routine Re-inspection
Telephone 676 (11) 6 721	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner 978-441-3734	HACCP Y/N	Temporary	☐ Pre-operation
Person ir-Charge (PIC)	Time	Caterer Bed & Breakfast	Suspect Illness General Complaint
Inchester / A STAND	In:	Permit No.	HACCP Other
Each violation checked requires an explanation on the narra	Out:		0
Water Temp Serve-Safe Cert Number	Live page(s) a	har 8 22/18	provision(s) violated
		Non	-compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	RISK Factors	ServSafe Pest Contr	590.003 (A) 🗆 ol 590.007 🗆
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	e Anti-Chok Tobacco Allergen A	ing 590.009 (E) □ 590.009 (F) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination from	· •
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	lwash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC		oved Food or Color Additive	es
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	: Chemicals	
FOOD FROM APPROVED SOURCE	TIME/TEMPER	RATURE CONTROLS (Potenti	ally Hazardous Foods)
4. Food and Water from Approved Source		ing Temperatures	,,
5. Receiving/Condition		eating	
6. Tags/Records/Accuracy of Ingredient Statements	🗌 18. Coolii	ng	
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot a	nd Cold Holding	
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTIE and Food Preparation for H	, ,
☐ 10. Proper Adequate Handwashing	CONSUMER A		
☐ 11. Good Hygienic Practices		ng of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. C N 23. Management and Personnel (FC-2)(590.003)	To Foodbe and Risk F Official Ore today, the it 590.000/fec	of Violated Provisions Rorne Illnesses Interven Factors (Red Items 1-22 der for Correction: Bastems checked indicate videral Food Code. This reof Health member or its	tions 2): ed on an inspection olations of 105 CMR port, when signed below
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure	
25. Equipment and Utensils (FC-4)(590,005)		report may result in sus tablishment permit and c	
26. Water, Plumbing and Waste (FC-5)(590,006)	establishme	ent operations. If aggriev	ed by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your requ ted to the Board of Healt	
29. Special Requirements (590.009)		ays of receipt of this orde	
30. Other		E-INSPECTION:	
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375 Merrimack Street

Lowell, MA Lowell Board of Health Compliant Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Type of Inspection Food Service **L** Routine Address Retail Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N ☐ Suspect Illness Caterer ☐ Bed & Breakfast General Complaint Person-in-Charge (PIC) Time ☐ HACCP In: Inspector Other Permit No. Out: Each violation checked requires an explanation on the narrative page(s) and a citatlon of specific provision(s) violated. Serve-Safe Cert Number ________ Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below C 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature Print:

PICs Signature

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection Food Service Routine Retail Re-inspection **Address** Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary Pre-operation Owner HACCP Y/N Caterer ☐ Suspect Illness Bed & Breakfast General Complaint Time Person-in-Charge (PIC HACCP In: Inspector Permit No. ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 15535355 Expiration Number Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) [(Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name of-Operation(s) Type of Inspection Food Service -Routine Retail Re-inspection **Address** Residential Kitchen Level Previous Inspection Mobile Date: Temporary Pre-operation HACCP Y/N Owner Suspect Illness Caterer General Complaint Bed & Breakfast Person-in-Charge (PIC) Time ☐ HACCP In: Permit No. Inspector ☐ Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. _ Serve-Safe Cert Number _______ Expiration Number _ Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) Pest Control 590.007 Anti-Choking 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) 🗆 corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT 12. Prevention of Contamination from Hands 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION:

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Inspector's Signature:

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Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT	Compl.	Lowell, N	rimack Street
Address 560 Broadway 52 Telephone	Date 5/6//8 Risk Level	Type of Operation(s) Food Service Retail Residential Kitchen Mobile	Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation
Person-in-Charge (PIC)	HACCP Y/N Time In: Out:	Caterer Bed & Breakfast Permit No.	Suspect Illness General Complaint HACCP Other
Water Temp Serve-Safe Cert Number (5-35-36) Violations Related to Foodborne Illness Interventions and	ative page(s) a	nber <u>9/1/22</u> Non-	provision(s) violated. compliance with: 590.003 (A)
(Red Items) Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health. FOOD PROTECTION MANAGEMENT		Pest Contro Anti-Chokir Tobacco Allergen Av	19 590.009 (E) 590.009 (F) 590.000 (G) 10 590.000 (G)
 □ 1. PIC Assigned/Knowledgeable/Duties EMPLOYEE HEALTH □ 2. Reporting of Diseases by Food Employee and PIC □ 3. Personnel with Infections Restricted/Excluded 	☐ 13. Hands PROTECTION ☐ 14. Appro	wash Facilities FROM CHEMICALS Eved Food or Color Additives	
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source 5. Receiving/Condition		RATURE CONTROLS (Potentia ng Temperatures	illy Hazardous Foods)
 6. Tags/Records/Accuracy of Ingredient Statements 7. Conformance with Approved Procedures/HACCP Plans PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection 		ng nd Cold Holding as a Public Health Control	
 9. Food Contact Surfaces Cleaning and Sanitizing 10. Proper Adequate Handwashing 11. Good Hygienic Practices 	21. Food a	TS FOR HIGHLY-SUSCEPTIBI and Food Preparation for HS DVISORY g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected	Number of To Foodbo	Violated Provisions Re orne Illnesses Intervention actors (Red Items 1-22):	ons
immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm8-14.doc	official Ord today, the it 590.000/fed by a Board of order of the cited in this the food est establishme have a right and submitte within 10 da	der for Correction: Basedems checked indicate vious leral Food Code. This report Health member or its a Board of Health. Failure to report may result in suspendishment permit and cent operations. If aggrieved to a hearing. Your requested to the Board of Health ys of receipt of this order.	d on an inspection lations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of ssation of food d by this order, you st must be in writing at the above address
Inspector's Signature: PICs Signature: Print: Print:	Jim Joseph	The Cold	PageofPages
The received	*/11/		-

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Date 3/1ン/1つ Name Type of Operation(s) Type of Inspection Food Service Routine Address Retail Risk Re-inspection Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Suspect Illness Caterer **General Complaint** ☐ Bed & Breakfast Person-in-Charge (PIC) Time HACCP in: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 120 * __ Serve-Safe Cert Number 168 77604 Expiration Number 8/03/23 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors-590.003 (A) 🗆 ServSafe (Red Items) **Pest Control** 590.007 Anti-Chokina 590.009 (E) [Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) [corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition ☐ 17. Reheating ☐ 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below CN 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc

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Lowell Board of Health	wed	'ed Tel.: 9	78-674-4144
FOOD ESTABLISHMENT INSPECTION REPORT A	flonte	Fax: 9	78-446-7103
Name Stock losa School	9/18/19	Food Service	Type of Inspection Routine
Address 560 Brandwa - 9L	Risk	Retail Residential Kitchen	Re-inspection
Telephone	Level		Previous Inspection Date:
Owner ()	HACCP Y/N	Temporary Caterer	Pre-operation
Person-in-Charge (PIC)	Time	Bed & Breakfast	☐ Suspect Illness☐ General Complaint
Inspector	ln:	Permit No.	☐ HACCP☐ Other
S. Willey Sc	Out:		
Water Temp Serve-Safe Cert Number 1553 Solution	auve page(s) a	nd a citation of specific	ic provision(s) violated.
		8/14/2 No	n-compliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -	8/14/20 ServSafe Pest Cont	
Violations marked may pose an imminent health hazard and re	quire immediate	Anti-Choi	king 590.009 (E)
corrective action as determined by the Board of Health.	4	I ODACCO	590.009 (F) ☐ Awareness 590.000 (G) ☐
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination fror	
1. PIC Assigned/Knowledgeable/Duties	_	vash Facilities	
EMPLOYEE HEALTH			
2. Reporting of Diseases by Food Employee and PIC		FROM CHEMICALS ved Food or Color Additive	95
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
FOOD FROM APPROVED SOURCE			tially Hannadaya E d.)
4. Food and Water from Approved Source		ATURE CONTROLS (Potenting Temperatures	uany nazardous roods)
5. Receiving/Condition	☐ 17. Rehea		
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	-	
☐ 7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot and Cold Holding		
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11. Good Hygienic Practices	22. Posting	g of Consumer Advisories	
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23. Management and Personnel (FC-2)(590.003)		of Health member or its	
24. Food and Food Protection (FC-3)(590.004)		Board of Health. Failure	
25. Equipment and Utensils (FC-4)(590.005)		report may result in sus ablishment permit and c	pension or revocation of cessation of
26. Water, Plumbing and Waste (FC-5)(590.006)	establishme	nt operations. If aggriev	ed by this order, you
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		to a hearing. Your requ	
29. Special Requirements (590.009)		ed to the Board of Healt ys of receipt of this orde	
30. Other		-INSPECTION:	
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Inspector's Signature: Print:	Jimby	0/6 11 11	
PICs Signature: Print:	Inn 1	Deallo Ho	Page _ of _ Pages
			

THE COMMONWEALTH OF MASSACHUSETTS

Date Verified Employee Restriction / Exclusion Emergency Suspension Emergency Closure of Of Other e O o o σ ø Page: Corrective Action Required: Re-inspection Scheduled **Board of Health** Voluntary Compliance DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal Embargo 6/18/10 Shok | Street 2nd floor Lowell, MA 01852 Ķ ٥ o PLEASE PRINT CLEARLY Dhmages Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name: Code Reference FC-6 Item No.

FORM 734B (REV. 7/2000)

City Hall 375 Merrimack Street Lowell, MA Lowell Board of Health Tel.: 978-674-4144 FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Type of Operation(s) Shocklose Type of Inspection Food Service ☐ Routine **Address** Risk Retail Re-inspection Residential Kitchen Level Previous Inspection Telephone Mobile Date: Temporary ☐ Pre-operation Owner HACCP Y/N Caterer Suspect Illness ☐ Bed & Breakfast **General Complaint** Person-in-Charge (PIC) Time HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp Serve-Safe Cert Number 1684 7604 Expiration Number 5/33/33 Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗆 (Red Items) Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Violations marked may pose an imminent health hazard and require immediate Tobacco 590.009 (F) corrective action as determined by the Board of Health. Allergen Awareness 590.000 (G) 🗆 FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control ■ 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue **Number of Violated Provisions Related** Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board Official Order for Correction: Based on an inspection of Health. today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below 23. Management and Personnel (FC-2)(590.003) by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print:

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of

Pages

PICs Signature

		6:1	, 375 Merr	imack Street
Lowell Board of Health	()	prred.	Lowell, M	
FOOD ESTABLISHMENT INSPECTION REPORT	1.11	on Ver	ded 101: 9/8	-674-4144 -446-7103
I N	HOF	Date	Type of Operation(s)	Type of Inspection
Address 421 W Meadow Rd		91/06/10	Food Service	Routine
Address 421 1 Mende 12 of	1700	Risk	Retail	Re-inspection
Telephone		_evel	Residential Kitchen Mobile	Previous Inspection Date:
Owner	1	ACCP Y/N	☐ Temporary	☐ Pre-operation
			│	Suspect Illness
Person-in-Charge (PIC) Susan Can non		ime n:	□ □ beu & bleaklast	☐ General Complaint☐ HACCP
Inspector	11.	out:	Permit No.	☐ Other
Each violation checked requires an explanation on t	he narrati	ve page(s) a	nd a citation of specific	provision(s) violated
Water Temp Serve-Safe Cert Number	19222	Expiration Num	ber 8/88/82	
Violations Related to Foodborne Illness Interventio			تر / ۱4 / کا / ۱۸ ServSafe	compliance with:
(Red Items)		0.1.1.2010.0	Pest Control	590.003 (A) 590.007
Violations marked may pose an imminent health hazard		ire immediate	Anti-Choking Tobacco	- , ,
corrective action as determined by the Board of Health			Allergen Aw	590.009 (F) areness 590.000 (G)
FOOD PROTECTION MANAGEMENT		☐ 12. Preve	ntion of Contamination from I	• •
☐ 1. PIC Assigned/Knowledgeable/Duties		_	wash Facilities	
EMPLOYEE HEALTH				
☐ 2. Reporting of Diseases by Food Employee and PIC			FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded			ved Food or Color Additives	
FOOD FROM APPROVED SOURCE		☐ 15. Toxic	Chemicals	22
4. Food and Water from Approved Source		TIME/TEMPER	RATURE CONTROLS (Potential	y Hazardous Foods)
5. Receiving/Condition		☐ 16. Cookii	ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements		☐ 17. Rehea	ating	
7. Conformance with Approved Procedures/HACCP Plan		☐ 18. Coolin	g	
PROTECTION FROM CONTAMINATION	15	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection		☐ 20. Time a	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		REQUIREMEN	TS FOR HIGHLY-SUSCEPTIBL	E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing		☐ 21. Food a	and Food Preparation for HSF	•
		CONSUMER A		
11. Good Hygienic Practices		☐ 22. Postin	g of Consumer Advisories	
Violations Related to Good Retail Practices_ (Blue		Number of	Violated Provisions Rel	ated
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Boar	rd		rne Illnesses Interventio	
of Health. Non-critical (N) violations must be corrected	u .	and Risk F	actors (Red Items 1-22):	L
mmediately or within 90 days as determined by the Boar	rd		der for Correction: Based	•
of Health.			ems checked indicate viol	
C N 23. Management and Personnel (FC-2)(590.003	ı)		feral Food Code. This repo of Health member or its ag	
24. Food and Food Protection (FC-3)(590.004	•		Board of Health. Failure to	
25. Equipment and Utensils (FC-4)(590.005			report may result in suspe	
26. Water, Plumbing and Waste (FC-5)(590.006	i)		ablishment permit and ces ent operations. If aggrieved	
27. Physical Facility (FC-6)(590.007			to a hearing. Your reques	
28. Poisonous or Toxic Materials (FC-7)(590.008	-		ed to the Board of Health	
29. Special Requirements (590.009 30. Other)		lys of receipt of this order.	
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Inspector's Signature:	Print:	Jin	Me	. 2
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35 John Street 2nd floor Lowell, MA 01852

OF Lowell

City

Board of Health

Date Verified Exclusion Emergency Suspension Employee Restriction / **Yes Emergency Closure** ō Other 20 ٥ Page: Corrective Action Required: Re-inspection Scheduled Voluntary Compliance DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal 8112118 Embargo Coading PLEASE PRINT CLEARLY File Date: OKKicci 2 Repail 11500 Dynni Solwal Damased Repuir Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name: Code Reference アフュ F. 6 Hem No. 3

Lowell Board of Health

Corrective Afron Meredel City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	~¢	The Me	redco) Fa	ax: 978-	446-7103
Name An Want School		Date 5/14 /19	Type of Operation Food Service	(s)	Type of Inspection Routine
Address 205		Risk	Retail	lo l	Re-inspection
Telephone Control Ko	L	_evel	Residential Kitc		Previous Inspection
		IACOD WIN	Temporary		Date: ☐ Pre-operation
Owner		HACCP Y/N	☐ Caterer		Suspect Illness
Person-in-Charge (PIC)		Time n:	☐ Bed & Breakfas	it	☐ General Complaint☐ HACCP
Inspector Jimms 6		out:	Permit No.		Other
Each violation checked requires an explanation on the				ecific p	rovision(s) violated
Water Temp / D Serve-Safe Cert Number 157	19222	Expiration Num			
Violations Related to Foodborne Illness Intervention	ns and Ri	sk Factors -	8/14/20 Ser	Non-c∈ vSafe	ompliance with: 590.003 (A)
(Red Items)			Pes	t Control	590.007 □
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	l and requ	iire immediate	Tob	i-Choking pacco ergen Awa	590.009 (F) □
FOOD PROTECTION MANAGEMENT		12. Preve	ntion of Contaminatio	n from H	ands
1. PIC Assigned/Knowledgeable/Duties		☐ 13. Handv	vash Facilities		
EMPLOYEE HEALTH		PROTECTION	FROM CHEMICALS		
2. Reporting of Diseases by Food Employee and PIC			ved Food or Color Ac	ditives	
3. Personnel with Infections Restricted/Excluded		☐ 15. Toxic			
FOOD FROM APPROVED SOURCE		_	ATURE CONTROLS (F	Potontiall	v Hazardoue Foods)
4. Food and Water from Approved Source			ng Temperatures	-otentian;	y Hazardous Foodsy
5. Receiving/Condition		☐ 17. Rehea			
☐ 6. Tags/Records/Accuracy of Ingredient Statements		☐ 18. Coolin	-		
☐ 7. Conformance with Approved Procedures/HACCP Plans	s				
PROTECTION FROM CONTAMINATION		_	d Cold Holding		
8. Separation/Segregation/Protection			is a Public Health Co		F DODUL ATIONS (HOD)
9. Food Contact Surfaces Cleaning and Sanitizing			and Food Preparation		E-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing		CONSUMER A			
☐ 11. Good Hygienic Practices		22. Posting	g of Consumer Advis	ories	
Violations Related to Good Retail Practices_ (Blue					
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board		To Foodbo and Risk F Official Ord	Violated Provision of the Illnesses Interpretens (Red Items der for Correction	rventioi s 1-22): ı: Based	ns on an inspection
of Health.			tems checked indic		ations of 105 CMR ort, when signed belov
C N 23. Management and Personnel (FC-2)(590.003)			of Health member		
24. Food and Food Protection (FC-3)(590.004)		order of the	Board of Health. F	ailure to	correct violations
25. Equipment and Utensils (FC-4)(590.005)			report may result i tablishment permit		nsion or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006)			ent operations. If a		
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)		have a right	to a hearing. Your	reques	t must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)					at the above address
30. Other			ays of receipt of this E-INSPECTION:	s order.	
S: 590InspecIForm6-14.doc		1			
Inspector's Signature:	Print:				
PICs Signature:	Print:	Sis	an Gannon		Page of 2 Pages
A MARINGA TATOUTHING			1 11 11/11/11		, ,

City Hall 375 Merrimack Street Lowell, MA Tel.: 978-674-4144 Fax: 978-446-7103 Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation Suspect Illness General Complaint ☐ HACCP ☐ Other Non-compliance with: 590.003 (A) [Pest Control 590.007 590.009 (E) 🗆 Anti-Choking Tobacco 590.009 (F) 🗆 Allergen Awareness 590.000 (G)

Lowell Board of Health **FOOD ESTABLISHMENT INSPECTION REPORT** Date ypy of Operation(s) Food Service Address Retail Risk Residential Kitchen Level Telephone Mobile Temporary Owner HACCP Y/N Caterer Bed & Breakfast Person-in-Charge (PIC) Time In: Inspector Permit No. Out: Each violation checked requires an expranation on the narrative page(s) and a citation of specific provision(s) violated. Water Temp 120 " Serve-Safe Cert Number 155/922 Expiration Number 8/19/20 Violations Related to Foodborne Illness Interventions and Risk Factors-(Red Items) Violations marked may pose an imminent health hazard and require immediate corrective action as determined by the Board of Health. FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives ☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals **FOOD FROM APPROVED SOURCE** TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) ☐ 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures 5. Receiving/Condition ☐ 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling ☐ 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION ☐ 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing 21. Food and Food Preparation for HSP 10. Proper Adequate Handwashing CONSUMER ADVISORY ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected

immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.

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ĺ			23. Management and Personnel	(FC-2)(590.003)
ĺ			24. Food and Food Protection	(FC-3)(590.004)
Ì			25. Equipment and Utensils	(FC-4)(590.005)
Ì			26. Water, Plumbing and Waste	(FC-5)(590.006)
Ì			27. Physical Facility	(FC-6)(590.007)
Ī			28. Poisonous or Toxic Materials	(FC-7)(590.008)
ľ			29. Special Requirements	(590.009)
Ì			30 Other	

To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order. DATE OF RE-INSPECTION:

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Inspector's Signature:	Print: Jumple	
PICs Signature. Susan Lan		Page of Pages

	/1	1		imack Street	
Lowell Board of Health Cerrechine FOOD ESTABLISHMENT INSPECTION REPORT Action Leader			Lowell, N		
FOOD ESTABLISHMENT INSPECTION REPORT	- Action	- Leeder	Fav: 978	3-674-4144 3-446-7103	
Name		Date,	Type_of Operation(s)	Type of Inspection	
Wany School	1	9/16/191	Food Service	Routine	
Address 365 W Menden Rd		Risk/	Retail	Re-inspection	
Telephone		Level	Residential Kitchen Mobile	Previous Inspection Date:	
Owner		HACCP Y/N	Temporary	Pre-operation	
			│	Suspect Illness	
Person-in-Charge (PIC) Sugan Gannon		Time n:	Deu & Dieakiasi	☐ General Complaint☐ HACCP	
Inspector Jimmy 4		Out:	Permit No.	Other	
Each violation checked requires an explanation on t	he narrati	ive page(s) a	nd a citation of specific	provision(s) violated.	
Water Temp / Serve-Safe Cert Number / (TT)	17222	Expiration Num	ber 8/28/22	. , ,	
Violations Related to Foodborne Illness Intervention			8/14/20 Non-	compliance with:	
(Red Items)	nis and Ri	isk ractors-	ServSafe Pest Control	590.003 (A) 🗆 590.007 🗆	
Violations marked may pose an imminent health hazard	d and requ	ire immediate	Anti-Chokin	g 590.009 (E) 🗆	
corrective action as determined by the Board of Health			Tobacco Allergen Aw	590.009 (F) areness 590.000 (G)	
FOOD PROTECTION MANAGEMENT		☐ 12 Preve	ntion of Contamination from I	(-, -	
1. PIC Assigned/Knowledgeable/Duties				ialius	
EMPLOYEE HEALTH		☐ 13. Hand	wash Facilities		
Reporting of Diseases by Food Employee and PIC			FROM CHEMICALS		
3. Personnel with Infections Restricted/Excluded			ved Food or Color Additives		
		☐ 15. Toxic	Chemicals		
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)	
		☐ 16. Cookir	ng Temperatures		
5. Receiving/Condition		☐ 17. Rehea	iting		
6. Tags/Records/Accuracy of Ingredient Statements		☐ 18. Coolin	_	11	
7. Conformance with Approved Procedures/HACCP Plan	s		d Cold Holding		
PROTECTION FROM CONTAMINATION			_		
8. Separation/Segregation/Protection		_	as a Public Health Control	E DODUM 45-5-1-5	
9. Food Contact Surfaces Cleaning and Sanitizing		_	TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	• • •	
☐ 10. Proper Adequate Handwashing		CONSUMER A	•		
11. Good Hygienic Practices			g of Consumer Advisories		
/iolations Related to Good Retail Practices_ (Blue					
ems) Critical (C) violations marked must be corrected			Violated Provisions Rela		
nmediately or within 10 days as determined by the Boar	d 🦠		porne Illnesses Interventions		
f Health. Non-critical (N) violations must be corrected	_		actors (Red Items 1-22): <i>Ier for Correction:</i> Based	l on an inequation	
nmediately or within 90 days as determined by the Board f Health.	a		ems checked indicate viol		
CN		•	eral Food Code. This repo		
23. Management and Personnel (FC-2)(590.003))		of Health member or its ag		
24. Food and Food Protection (FC-3)(590.004)	ı		Board of Health. Failure to		
25. Equipment and Utensils (FC-4)(590.005)			report may result in suspe ablishment permit and ces		
26. Water, Plumbing and Waste (FC-5)(590.006)		nt operations. If aggrieved			
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)			to a hearing. Your reques		
29. Special Requirements (590.009)			ed to the Board of Health	at the above address	
30. Other (350.505)			ys of receipt of this order.	>	
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Inspector's Signature:	Print:				
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PICs Signature:	Print:	6'.	·/·	Page of Pages	

City Hall

THE COMMONWEALTH OF MASSACHUSETTS

Date Verified Employee Restriction / Exclusion Emergency Suspension O Yes **Emergency Closure** ō Other 4 e O o ٥ o Page: Corrective Action Required: Re-inspection Scheduled **Board of Health** Voluntary Compliance DESCRIPTION OF VIOLATION / PLAN OF CORRECTION Voluntary Disposal Embargo City OF Lowell 35 John Street 2nd floor Lowell, MA 01852 0 PLEASE PRINT CLEARLY Date: Subool Discussion With Person in Charge: C - Critical Item R - Red Item Establishment Name: FORM 734R (RFV 7/2000) Code Reference 2-24 ltem No.

Lowell Board of Health FOOD ESTABLISHMENT INSPECTION REPORT Cenflied

City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT			Fax: 9/8	-446-7103
Name None School	D	ate 1/5	Type of Operation(s) Food Service	Type of Inspection Routine
Address 365 W Menden Rd	R	isk	Retail	Re-inspection
Telephone	Le	evel	Residential Kitchen	Previous Inspection Date:
			☐ Mobile☐ Temporary	☐ Pre-operation
Owner	H	ACCP Y/N	☐ Caterer	☐ Suspect Illness
Person-in-Charge (PIC) Wat Presont		ime	☐ Bed & Breakfast	☐ General Complaint ☐ HACCP
Inspector)-muns (e	In O	ut:	Permit No.	Other
Each violation checked requires an explanation on th			nd a citation of specific	provision(s) violated.
Water Temp 1200 Serve-Safe Cert Number 155	<i>F1732</i> _E	xpiration Num	ber 8/8/22 Non-	compliance with:
Violations Related to Foodborne Illness Intervention	s and Ris	k Factors -	ServSafe	590.003 (A)
(Red Items)			Pest Control Anti-Chokin	
Violations marked may pose an imminent health hazard corrective action as determined by the Board of Health.	and requi	re immediate	Tobacco Allergen Aw	590.009 (F)
FOOD PROTECTION MANAGEMENT		12. Prever	ntion of Contamination from I	-lands
1. PIC Assigned/Knowledgeable/Duties		13. Handv	vash Facilities	
EMPLOYEE HEALTH		PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC			ved Food or Color Additives	
☐ 3. Personnel with Infections Restricted/Excluded		☐ 15. Toxic (Chemicals	
FOOD FROM APPROVED SOURCE		_	RATURE CONTROLS (Potential	lly Hazardous Foods)
☐ 4. Food and Water from Approved Source			ng Temperatures	ny mazardous i oods)
☐ 5. Receiving/Condition		☐ 17. Rehea		
☐ 6. Tags/Records/Accuracy of Ingredient Statements			-	
☐ 7. Conformance with Approved Procedures/HACCP Plans		18. Coolin	_	
PROTECTION FROM CONTAMINATION			d Cold Holding	
8. Separation/Segregation/Protection		_	as a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing			I TS FOR HIGHLY-SUSCEPTIBL and Food Preparation for HSI	• • •
☐ 10. Proper Adequate Handwashing		CONSUMER A	•	
11. Good Hygienic Practices			g of Consumer Advisories	
/iolations Related to Good Retail Practices_ (Blue		6	·	
tems) Critical (C) violations marked must be corrected mmediately or within 10 days as determined by the Board	t	To Foodbo	Violated Provisions Rel rne Illnesses Interventic actors (Red Items 1-22):	ons
of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board	4		der for Correction: Base	
of Health.	•	today, the i	tems checked indicate vio	lations of 105 CMR
CN			deral Food Code. This rep	
23. Management and Personnel (FC-2)(590.003)			of Health member or its a Board of Health. Failure	
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)			report may result in susp	
26. Water, Plumbing and Waste (FC-5)(590.006)			tablishment permit and ce	
27. Physical Facility (FC-6)(590.007)			ent operations. If aggrieve t to a hearing. Your reque	
28. Poisonous or Toxic Materials (FC-7)(590.008)			ted to the Board of Health	
29. Special Requirements (590.009)			ays of receipt of this order	
30. Other		DATE OF R	E-INSPECTION:	
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City Hall 375 Merrimack Street

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Lowell, MA

Lowell Board of Health

PICs Signature:

Tel.: 978-674-4144 Compliani FOOD ESTABLISHMENT INSPECTION REPORT Fax: 978-446-7103 Name Date Type of Operation(s) Type of Inspection Food Service Routine Re-inspection Retail Address Risk Residential Kitchen Previous Inspection Level Telephone Mobile Date: Temporary ☐ Pre-operation HACCP Y/N Owner Caterer ☐ Suspect Illness ☐ Bed & Breakfast General Complaint Time Person-in-Charge (PIC) ☐ HACCP In: Inspector Permit No. Other Out: Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated. Serve-Safe Cert Number 11865060 xpiration Number Water Temp __/// ° Non-compliance with: Violations Related to Foodborne Illness Interventions and Risk Factors -ServSafe 590.003 (A) 🗀 (Red Items) 590.007 **Pest Control** Anti-Choking 590.009 (E) 🗆 Violations marked may pose an imminent health hazard and require immediate 590.009 (F) 🗆 Tobacco corrective action as determined by the Board of Health. 590.000 (G) 🗆 Allergen Awareness FOOD PROTECTION MANAGEMENT ☐ 12. Prevention of Contamination from Hands ☐ 1. PIC Assigned/Knowledgeable/Duties ☐ 13. Handwash Facilities **EMPLOYEE HEALTH** PROTECTION FROM CHEMICALS 2. Reporting of Diseases by Food Employee and PIC ☐ 14. Approved Food or Color Additives 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals FOOD FROM APPROVED SOURCE TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods) 4. Food and Water from Approved Source ☐ 16. Cooking Temperatures ☐ 5. Receiving/Condition 17. Reheating 6. Tags/Records/Accuracy of Ingredient Statements ☐ 18. Cooling 7. Conformance with Approved Procedures/HACCP Plans ☐ 19. Hot and Cold Holding PROTECTION FROM CONTAMINATION 20. Time as a Public Health Control 8. Separation/Segregation/Protection REQUIREMENTS FOR HIGHLY-SUSCEPTIBLE-POPULATIONS (HSP) 9. Food Contact Surfaces Cleaning and Sanitizing ☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing **CONSUMER ADVISORY** ☐ 11. Good Hygienic Practices 22. Posting of Consumer Advisories Violations Related to Good Retail Practices_ (Blue Number of Violated Provisions Related Items) Critical (C) violations marked must be corrected To Foodborne Illnesses Interventions immediately or within 10 days as determined by the Board and Risk Factors (Red Items 1-22): of Health. Non-critical (N) violations must be corrected Official Order for Correction: Based on an inspection immediately or within 90 days as determined by the Board today, the items checked indicate violations of 105 CMR of Health. 590.000/federal Food Code. This report, when signed below N by a Board of Health member or its agent constitutes an 23. Management and Personnel (FC-2)(590.003) order of the Board of Health. Failure to correct violations 24. Food and Food Protection (FC-3)(590.004) cited in this report may result in suspension or revocation of 25. Equipment and Utensils (FC-4)(590.005) the food establishment permit and cessation of food 26. Water, Plumbing and Waste (FC-5)(590.006) establishment operations. If aggrieved by this order, you 27. Physical Facility (FC-6)(590.007) have a right to a hearing. Your request must be in writing 28. Poisonous or Toxic Materials (FC-7)(590.008) and submitted to the Board of Health at the above address 29. Special Requirements (590.009)within 10 days of receipt of this order. 30. Other DATE OF RE-INSPECTION: S: 590InspectForm6-14.doc Inspector's Signature: Print: dem

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City Hall 375 Merrimack Street

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Compliantel: 978-674-4144

FOOD ESTABLISHMENT INSPECTION REPORT	· · · · · · · · · · · · · · · · · · ·	Fax: 978	-674-4144 -446-7103		
Name Washington Jahoul Address 7705 HILL LAND ASSESSIONED	Date 9 23 18 Risk	Type of Operation(s) ☐ Food Service ☐ Retail	Type of Inspection ☐ Routine ☐ Re-inspection		
Telephone / Que Good Good Good Good Good Good Good Goo	Level	Residential Kitchen Mobile	Previous Inspection Date:		
Owner ()	HACCP Y/N	Temporary	☐ Pre-operation		
Person-in-Charge (PIC)	Time	Caterer Bed & Breakfast	☐ Suspect Illness☐ General Complaint		
	In:	_	HACCP		
Inspector Quilla Kulla	Out:	Permit No.	Other		
Water Temp Serve-Safe Cert Number	Attive page(s) a	the a citation of specific	provision(s) violated 7		
Violations Related to Foodborne Illness Interventions and		Non-c	compilance with:		
(Red Items)	KISK FACIOIS-	ServSafe Pest Control	590.003 (A) □ 590.007 □		
Violations marked may pose an imminent health hazard and re corrective action as determined by the Board of Health.	quire immediate	e Anti-Chokin Tobacco Allergeл Aw	590.009 (F) □		
FOOD PROTECTION MANAGEMENT 1. PIC Assigned/Knowledgeable/Duties		ntion of Contamination from I wash Facilities	-lands		
EMPLOYEE HEALTH ☐ 2. Reporting of Diseases by Food Employee and PIC ☐ 3. Personnel with Infections Restricted/Excluded		FROM CHEMICALS ved Food or Color Additives			
_	☐ 15. Toxic	Chemicals			
FOOD FROM APPROVED SOURCE 4. Food and Water from Approved Source		RATURE CONTROLS (Potential	ly Hazardous Foods)		
5. Receiving/Condition		ng Temperatures			
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	-			
7. Conformance with Approved Procedures/HACCP Plans	18. Coolin				
PROTECTION FROM CONTAMINATION		nd Cold Holding			
8. Separation/Segregation/Protection	· 	as a Public Health Control ITS FOR HIGHLY-SUSCEPTIBL	E DODUH ATIONS (USD)		
9. Food Contact Surfaces Cleaning and Sanitizing		and Food Preparation for HSI			
10. Proper Adequate Handwashing		CONSUMER ADVISORY			
11. Good Hygienic Practices	22. Postin	g of Consumer Advisories			
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health. 23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other S: 590InspectForm6-14.doc	To Foodbo and Risk F Official On today, the it 590.000/fed by a Board order of the cited in this the food es establishme have a right and submitt within 10 da	Violated Provisions Relorne Illnesses Intervention actors (Red Items 1-22): der for Correction: Based tems checked indicate vious deral Food Code. This report Health member or its as Board of Health. Failure to report may result in suspetablishment permit and cent operations. If aggrieved to a hearing. Your requested to the Board of Health ays of receipt of this order.	d on an inspection lations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of ssation of food d by this order, you at must be in writing at the above address		
Inspector's Signature: Print:	Acurat	-Kiveso-			
PICs Signature: V Print:			Pageof Pages		

Lowell Board of Health

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City Hall 375 Merrimack Street Lowell, MA

Tel.: 978-674-4144 Fax: 978-446-7103

FOOD ESTABLISHMENT INSPECTION REPORT		Fa	ıx: 978-4	446-7103
Name Wankington School	Date 3/29/19	Type of Operation(☐ Food Service		Type of Inspection Routine
Address 195 111 01 10 10 10 10 1	Risk	Retail]	Re-inspection
Telephone Q16- C27- 265	Level	Residential Kitch		Previous Inspection Date:
Owner	HACCP Y/N	Temporary	ļį	Pre-operation
		│	, <u> </u>	☐ Suspect Illness ☐ General Complaint
Person-in-Charge (PIC)	Time In:		` [HACCP
Inspector Wille Rivera	Out:	Permit No.		Other
Water Temp Serve-Safe Cert Number	ative page(s) a	111		rovision(s) violated. 2019
				ompliance with:
Violations Related to Foodborne Illness Interventions and (Red Items)	Risk Factors -		vSafe t Control	590.003 (A) □ 590.007 □
Violations marked may pose an imminent health hazard and re	quire immediate	e Anti	-Choking	590.009 (E) 🗆
corrective action as determined by the Board of Health.	•		acco rgen Awa	590.009 (F) reness 590.000 (G)
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination	n from Ha	ands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand\	wash Facilities		
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS		
2. Reporting of Diseases by Food Employee and PIC	☐ 14. Appro	ved Food or Color Ad	ditives	
3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals		
FOOD FROM APPROVED SOURCE	TIME/TEMPEF	RATURE CONTROLS (P	otentially	/ Hazardous Foods)
4. Food and Water from Approved Source	🔲 16. Cookir	ng Temperatures		
5. Receiving/Condition	17. Rehea	ating		
6. Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	g		
7. Conformance with Approved Procedures/HACCP Plans	☐ 19. Hot ar	nd Cold Holding		
PROTECTION FROM CONTAMINATION 8. Separation/Segregation/Protection	☐ 20. Time a	as a Public Health Cor	ntrol	
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSC		-POPULATIONS (HSP)
☐ 10. Proper Adequate Handwashing		and Food Preparation	for HSP	
11. Good Hygienic Practices	CONSUMER A	\DVISORY g of Consumer Adviso	ories	
Violations Related to Good Retail Practices (Blue		g or consumer havior	J1100	
Items) Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board	To Foodbo	Violated Provision orne Illnesses Inter factors (Red Items	rvention	
of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board		der for Correction:	•	on an inspection
of Health.	• •	tems checked indicate		
C N 23. Management and Personnel (FC-2)(590.003)		deral Food Code. If of Health member o		rt, when signed below ent constitutes an
24. Food and Food Protection (FC-3)(590.004)	order of the	Board of Health. F	ailure to	correct violations
25. Equipment and Utensils (FC-4)(590.005)				nsion or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit a ent operations. If ag		
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	have a right	t to a hearing. Your	request	must be in writing
28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)		ted to the Board of I ays of receipt of this		t the above address
30. Other		estins of the cerpt of this E-INSPECTION:	oluel.	
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Inspector's Signature	A11100	PIDE		
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Lowell Board of Health

Compliance Lowell, MA Tel.: 978-674-4144

City Hall 375 Merrimack Street

FOOD ESTABLISHMENT INSPECTION REPORT			78-446-7103
Name Waphington School	Pate 9/18/19	Type of Operation(s) ☐ Food Service	Type of Inspection Routine
Address 795 Wilder Hoof	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection
Telephone (978) 9211-7635	reaei	Mobile	Date:
Owner	HACCP Y/N	Temporary Caterer	Pre-operation
Person-in-Charge (PIC)	Time	Bed & Breakfast	Suspect Illness General Complaint
Inspector Quality & C. Louis	In: Out:	Permit No.	HACCP Other
Each violation checked requires an explanation on the name			
Water Temp 110° Serve-Safe Cert Number 1830 960			
Violations Related to Foodborne Illness Interventions and		Nor	n-compliance with:
(Red Items)	I KISK FACIOIS-	ServSafe Pest Contr	590.003 (A) rol 590.007
Violations marked may pose an imminent health hazard and recorrective action as determined by the Board of Health.	equire immediat	Lobacco	590.009 (E) □ 590.009 (F) □ Awareness 590.000 (G) □
FOOD PROTECTION MANAGEMENT	☐ 12. Preve	ention of Contamination fron	n Hands
1. PIC Assigned/Knowledgeable/Duties	☐ 13. Hand	wash Facilities	
EMPLOYEE HEALTH		FROM CHEMICALS	
 2. Reporting of Diseases by Food Employee and PIC 		oved Food or Color Additive	is.
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		•
FOOD FROM APPROVED SOURCE	_		
4. Food and Water from Approved Source		RATURE CONTROLS (Potenti	ially Hazardous Foods)
5. Receiving/Condition	_	ng Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	ating	
☐ 7. Conformance with Approved Procedures/HACCP Plans	🗌 18. Coolir	ıg	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/Segregation/Protection	☐ 20. Time :	as a Public Health Control	12
9. Food Contact Surfaces Cleaning and Sanitizing		ITS FOR HIGHLY-SUSCEPTI	
☐ 10. Proper Adequate Handwashing		and Food Preparation for H	ISP
11. Good Hygienic Practices	CONSUMER A	ADVISORY ng of Consumer Advisories	
	22. 1 O3tiii	g of Collisatilet Advisories	
Violations Related to Good Retail Practices_ (Blue Items) Critical (C) violations marked must be corrected	Number of	f Violated Provisions R	elated
immediately or within 10 days as determined by the Board		orne Ilinesses Intervent	
of Health. Non-critical (N) violations must be corrected		Factors (Red Items 1-22	•
mmediately or within 90 days as determined by the Board		<i>der for Correction:</i> Bas tems checked indicate vi	
of Health.		deral Food Code. This re	
23. Management and Personnel (FC-2)(590.003)		of Health member or its	
24. Food and Food Protection (FC-3)(590,004)		Board of Health. Failure	
25. Equipment and Utensils (FC-4)(590.005)		report may result in sus	
26. Water, Plumbing and Waste (FC-5)(590.006)		tablishment permit and c ent operations. If aggriev	
27. Physical Facility (FC-6)(590.007)		t to a hearing. Your requ	
28. Poisonous or Toxic Materials (FC-7)(590.008)		ted to the Board of Healt	
29. Special Requirements (590.009)		ays of receipt of this orde	er.
30. Other s: 590InspeciForm6-14.doc	DATE OF RE	E-INSPECTION:	
Inspector's Signature: Quel KI Vela. Print:	Aure A	RIVEVA	
PICs Signature: / DA Print:	YINI C	1.11 \ 10.10	Page of Pages